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COUNTY HALL,
HERTFORD.
July, 1960.

To the Chairman and Members of the Health Committee.

LADIES AND GENTLEMEN,

I have the honour to submit my Report for the Year 1959.

Last year, my introductory letter began with a reference to the sudden death of the Chairman. This year, one can begin on a happier note. By the unanimous vote of the Committee Mrs. I. D. Paterson was invited to accept office as Chairman and was installed at the meeting in March, 1959.

At the same time, it was decided that the work of the Health Committee had become too complicated and intricate for detailed consideration at formal sessions of a Committee of forty-six. Three new Sub-Committees were instituted. Membership ranges from seven to twelve. The intimate discussion which is possible at these small Committees gives members an opportunity of becoming conversant with the subject matter of the reports which ultimately go before the full Committee.

After an initial series of introductory letters, each showing an improvement on its predecessor, I felt it wise to warn the Committee that vital statistics could not be expected to improve indefinitely. This warning has been renewed from time to time, but the influx of the new populations to the County, together with advances in preventive and curative medicine, have happily combined to confound the Jeremiah, and this report—the twentieth in the series—continues to record improvements in many directions.

The actual number of births attributable to this County increased by 232, but the total expressed as a rate per thousand of population showed a decline of 0·2. The Infant Mortality Rate was increased by 0·2 per thousand, but was still well below the national rate.

The number of influenza deaths rose from 31 to 128, with the result that, though there were fractional falls in the death rates for cancer and heart disease and in the number of deaths due to motoring accidents, the death rate rose from 10·33 to 10·43 against a national figure of 11·6.

Though the number of births occurring in the County decreased by 78, the total number of Midwives employed in the County was increased by 25. Similarly, the number of pupils doing the three months district training in this County increased from 114 to 121.

References are made on page 59 and elsewhere throughout the Report to the start made in expanding the Health Department services to meet the demands of the new Mental Health Act.

My penultimate predecessor's Report for 1909 contains a far-sighted article headed " Roads, Dust, Motor Traffic, and Development ". He suggests that attention should be paid to the control of four factors :—

- (1) Noise,
- (2) Smell,
- (3) Dust,
- (4) Danger,

and suggests ways in which this control could be exercised. He notes that motor traffic has a particularly damaging effect upon roads reduced to a sodden condition in wet weather, and points out that flint dressing, when reduced to powder, can give rise to a dust which is likely to have an injurious effect on the lungs. The time-honoured way of preventing the distribution of dust is by watering, but he welcomed the County's decision to spend £4,000 for tarring road surfaces. This sum would enable them to deal with 100 of the 130 miles of road affected by fast motor traffic.

In another article, he expresses concern about the coming into law on 1st April, 1910, of the Midwives' Act of 1902, and the ban on practice by unqualified women except under medical supervision. He foresees that, if this law is enforced before there is a sufficient number of trained Midwives, people will be obliged to continue to employ unqualified women and thus bring the law into disrepute. He justifies his concern by stating that, out of thirty parishes, twelve have Nurses who do not practise as Midwives, and things are bound to go wrong unless local Nursing Associations are started.

In conclusion, I have, as always, to thank those who have contributed to this Report either by working in the services under discussion, or by reporting on them. My special thanks go to Dr. Stewart (my Deputy) and Mr. Treharne (my Chief Clerk) for editing, annotating, and collating the individual reports and comments in a form suitable for printing.

I am, Ladies and Gentlemen,

Your obedient servant,

J. L. DUNLOP,

County Medical Officer.

CHAIRMAN OF THE HEALTH COMMITTEE

Mrs. I. D. Paterson, J.P.

SALARIED STAFF.

(As at 31st December, 1959.)

County Medical Officer.

J. L. Dunlop, M.D., D.P.H., D.T.M. & H

Deputy County Medical Officer.

W. Stewart, M.B., Ch.B., D.P.H.

Principal Dental Officer.

A. H. Millett, L.D.S., R.C.S.

Consultant Psychiatrist (part-time).

Alfred Torrie, M.A., M.B., Ch.B., D.P.M.

Divisional Medical Officers.

(See also page 7.)

Dacorum.

R. S. Hynd, M.B., Ch.B., D.P.H., Churchill, Park Road, Hemel Hempstead.

North Herts.

V. R. Walker, B.Sc., M.B., Ch.B., D.P.H., 12 Brand Street, Hitchin.

St. Albans.

J. C. Sleigh, M.B., Ch.B., D.P.H., 15 Hatfield Road, St. Albans.

South-West Herts.

W. Alcock, M.B., Ch.B., B.Hy., D.P.H., Town Hall, Watford.

Welwyn.

G. R. Taylor, M.B., B.S., D.P.H., "Gooseacre," Cole Green Lane, Welwyn Garden City.

South Herts Division

East Herts Division

} No Divisional Scheme in force.

Assistant County Medical Officers.

R. M. Allinson, M.B., Ch.B., D.P.H.

F. Barasi, M.R.C.S., L.R.C.P., D.P.H.

D. M. Batty, M.B., Ch.B.

J. M. Beard, B.Sc., M.B., Ch.B.

E. W. G. Birch, M.B., B.S., D.P.H.

M. D. Clarke, M.B., B.S.

B. E. S. Colman, B.A., M.R.C.S., L.R.C.P.

J. E. Crawley, M.B., Ch.B., M.R.C.P.

K. W. M. Harbord, B.A., M.B., B.Ch., B.A.O.

E. C. Howarth, M.B., B.S.

E. M. Harrison, M.B., Ch.B., D.P.H.

L. S. Karpati, M.D. (Graz).

N. MacRae, M.B., Ch.B., D.P.H.

S. J. Moynihan, M.R.C.S., L.R.C.P.

P. B. M. O'Reilly, M.R.C.S., L.R.C.P., D.P.H.

H. E. D. E. Ormiston, M.B., B.S., D.P.H.

J. M. B. Orr, M.B., Ch.B.

M. I. Outram, M.B., Ch.B., D.P.H.

B. A. Richards, M.B., B.S.

E. R. Rue, M.B., B.S.

E. E. Walton, M.B., B.S.

M. E. Watkins, M.B., B.S.

A. Wilkes, M.B., B.S., D.P.H. (part-time).

A. H. Wright, M.B., Ch.B.

There are in addition 28 doctors working on a sessional basis.

Chest Physicians (Part-time).

T. A. W. Edwards, B.A., M.B., B.Ch., M.R.C.P.
 A. G. Hounslow, M.D.
 N. A. Neville, B.M., B.Ch., M.R.C.P.
 P. W. Roe, B.A., B.M., B.Ch.
 J. B. Shaw, M.D., D.P.H.

County Nursing Officer and Day Nurseries Supervisor.

V. M. King, S.R.N., S.C.M., H.V., Q.N.

Deputy County Nursing Officer and Divisional Nursing Officer for South Herts

M. A. McClements, S.R.N., S.C.M., H.V., Q.N.

Divisional Nursing Officers

<i>East Herts</i>	. B. Brewer, S.R.N., S.C.M., H.V., Q.N.
<i>Dacorum</i>	. J. C. Maughan, S.R.N., S.C.M., H.V., Q.N.
<i>North Herts</i>	. S. H. Kestin, S.R.N., S.C.M., H.V., Q.N.
<i>St. Albans</i>	. G. A. Schadek, S.R.N., S.C.M., H.V., Q.N.
<i>S.W. Herts</i>	. N. S. Teed, M.B.E., S.R.N., S.C.M., H.V.
<i>Welwyn</i>	. D. A. Reay, S.R.N., S.C.M., H.V., Q.N.

County Health Inspector.

J. L. Stringer, M.R.S.I., Cert.S.I.B.

Almoner.

P. Morfey, M.A., A.M.I.A.

Home Help Organizer.

H. M. Watson.

Senior Authorized Officer.

W. H. Finch.

Mental Welfare Officers.

H. D. Bushell.	A. G. Peace.
M. V. Coupland.	E. M. Rendle.
G. M. Harwood, B.A.	P. E. Rock.
E. M. Morris.	G. E. M. Witter.

Chief Clerk.

W. A. Treharne, A.C.I.S.

MEDICAL OFFICERS OF HEALTH AND PUBLIC HEALTH INSPECTORS OF COUNTY DISTRICTS.

(As at 31.12.1959.)

<i>Division.</i>	<i>District M.O.H.</i>	<i>County District.</i>	<i>Public Health Inspector.</i>	
East Herts	Dr. E. M. Harrison (A.C.M.O.).	Bishop's Stortford U.D.	Mr. A. L. Good	
	*Dr. C. R. Hillis (temporary).	Cheshunt U.D. . .	Mr. C. Wilson	
	Dr. G. M. Frizelle	Hertford B. . .	Mr. B. Peck	
		Hoddesdon U.D. . .	Mr. W. N. David	
		Sawbridgeworth U.D. . .	Mr. C. A. Ford	
		Ware U.D. . .	Mr. C. J. Lucas	
		Braughing R.D. . .	Mr. E. E. Wateridge	
*Dr. J. E. Crawley	Ware R.D. . .	Mr. A. D. G. Goold		
	Hertford R.D. . .	Mr. H. E. Gilby		
North Herts	Dr. V. R. Walker (Divisional County M.O.).	Baldock U.D. . .	Mr. A. D. Gates	
		Hitchin U.D. . .	Mr. N. Holt	
		Letchworth U.D. . .	Mr. A. Jump	
		Royston U.D. . .	Mr. S. M. Jackson	
		Stevenage U.D. . .	Mr. R. V. Lamey	
		Hitchin R.D. . .	Mr. W. M. Matthews	
		St. Albans	Dr. J. C. Sleigh (Divisional County M.O.).	City of St. Albans	Mr. R. E. C. Goddard
Harpenden U.D.	Mr. J. Snowden			
St. Albans R.D.	Mr. D. J. Graham			
*Dr. G. W. Everett (temporary).	Elstree R.D. . .			Mr. A. D. S. Blackhall
South Herts	Dr. A. L. Hyatt (temporary).	Barnet U.D. . .	Mr. J. B. Wilson	
	*Dr. C. M. Scott (temporary).	East Barnet U.D. . .	Mr. W. K. Pickup	
South-West Herts.	Dr. W. Alcock (Divisional County M.O.).	Watford B. . .	Mr. K. H. Marsden	
		Dr. W. Harvey . .	Bushey U.D. . .	Mr. A. C. F. Gisborne
			Chorleywood U.D. . .	Mr. W. E. Hands
			Rickmansworth U.D. . .	Mr. C. R. Alexander
			Watford R.D. . .	Mr. S. N. Grigg
Welwyn	Dr. G. R. Taylor (Divisional County M.O.).	Welwyn Garden City U.D.	Mr. M. Stockdale	
		Hatfield R.D. . .	Mr. C. A. Bailey	
		Welwyn R.D. . .	Mr. P. B. Hawley	
Dacorum	Dr. R. S. Hynd (Divisional County M.O.).	Hemel Hempstead B. . .	Mr. A. C. Horne	
		Berkhamsted U.D. . .	Mr. R. C. Sweet	
		Tring U.D. . .	Mr. R. C. Sanderson	
		Berkhamsted R.D. . .	Mr. C. Laidman	
		Hemel Hempstead R.D.	Mr. R. H. T. Chappell	

* Also holds appointment as part-time A.C.M.O.

Except where indicated, the officers named here serve County District Councils and are not on the staff of the County Council. This list is included in the Report for the information of those interested in the staffing of the Health Services in the County as a whole.

ANNUAL REPORT, 1959.

VITAL STATISTICS FOR THE COUNTY OF HERTFORD.

TABLE 1.
POPULATION AND ACREAGE.

	Acreage (land and water)	Population at Mid Year			
		Estimate 1956	Estimate 1957	Estimate 1958	Estimate 1959
Boroughs	21,496	173,530	178,800	182,710	186,620
Urban Districts	71,982	322,670	335,000	347,190	360,680
Rural Districts	311,046	218,800	226,000	231,300	236,700
County	404,524	715,000	739,800	761,200	784,000
England and Wales	37,339,215	45,386,000			

The population of the County has again increased—this year by 23,000. These annual increases are expected to continue until 1973 when according to plan the population of Hertfordshire will be 931,000.

TABLE 2.
STATISTICAL SUMMARY.

Live Births	13,850
Live Birth Rate per 1,000 population	17·67
Still Births	258
Still Births rate per 1,000 live and still births	18·30
Total live and still births	14,108
Infant Deaths	231
Infant Mortality per 1,000 live births—total	16·68
" " " " " " " legitimate	16·74
" " " " " " " illegitimate	15·21
Neo Natal " " " " " " (first four weeks)	12·27
Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births)	10·83
Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and still births)	28·94
Illegitimate live births per cent of total live births	3·80
Maternal deaths (including abortion)	5
Maternal mortality rate per 1,000 live and still births	0·35
Epidemic death rate per 1,000 population	0·02
Phthisis death rate per 1,000 population	0·08
Cancer death rate per 1,000 population	1·75
Heart Disease death rate per 1,000 population	2·91

This summary of the principal vital statistics is prepared from data supplied by the Registrar-General.

The death rate and the birth rate compare favourably with National figures. This comparison could, of course, be discounted by the fact that the rates given here are crude rates and have no regard for the unbalanced population existing in this County at the present time where a preponderance of young people will obviously tend to give a rise in the birth rate and an apparent fall in the death rate. If the balancing factor produced by the Registrar General is applied to the rates in this County they compare with the National figures as shown below :—

	Crude rate	Rate by balancing factor	National rate
Death rate	9·57	10·43	11·6
Birth rate	17·67	16·26	16·5

TABLE 3.—CAUSES OF DEATH, 1959.

		AGE GROUPS—BOROUGHS AND URBAN DISTRICTS														AGE GROUPS—RURAL DISTRICTS														County Total
		0—				1—				5—				15—				45—				65—				All Ages		Total M&F		
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F					
1	Tuberculosis—respiratory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	19	47			
2	Tuberculosis—other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	3			
3	Syphilitic disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	9			
4	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
5	Whooping cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
6	Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
7	Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
8	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
9	Other infective and parasitic diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
10	Malignant neoplasm—stomach	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8	14			
11	Malignant neoplasm, lungs, bronchus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	51	173			
12	Malignant neoplasm—breast	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	90	313			
13	Malignant neoplasm—uterus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	49	141			
14	Other malignant and lymphatic neoplasms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15	62			
15	Leukæmia, aleukæmia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	196	684			
16	Diabetes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	38			
17	Vascular lesions of nervous system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17	50			
18	Coronary disease—angina	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	322	1,047			
19	Hypertension with heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	379	1,153			
20	Other heart disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	46	179			
21	Other circulatory disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	316	950			
22	Influenza	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	97	314			
23	Pneumonia	14	11	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	58	128			
24	Bronchitis	1	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	157	499			
25	Other diseases of respiratory system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	98	332			
26	Ulcer of stomach and duodenum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	20	61			
27	Gastritis, enteritis, and diarrhoea	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	14	71			
28	Nephritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	13	38			
29	Hyperplasia of prostate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	20	46			
30	Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15	46			
31	Congenital malformations	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	5			
32	Other defined and ill-defined diseases	16	16	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	29	76			
33	Motor vehicle accidents	66	29	2	1	3	2	14	30	40	82	169	200	255	455	23	10	2	3	1	1	11	17	42	58	104	202	657		
34	All other accidents	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	90			
35	Suicide	2	2	4	2	9	3	5	15	4	27	50	68	25	130	—	—	—	—	—	—	—	—	—	—	34	189			
36	Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	79			
	Totals	104	63	16	5	18	12	134	101	694	421	1593	1975	2559	5,136	36	28	10	5	13	15	85	56	305	189	702	923	2,367	7,503	

TABLE 4.—LIVE BIRTH RATE, 1930-1959.
Per 1,000 Population.

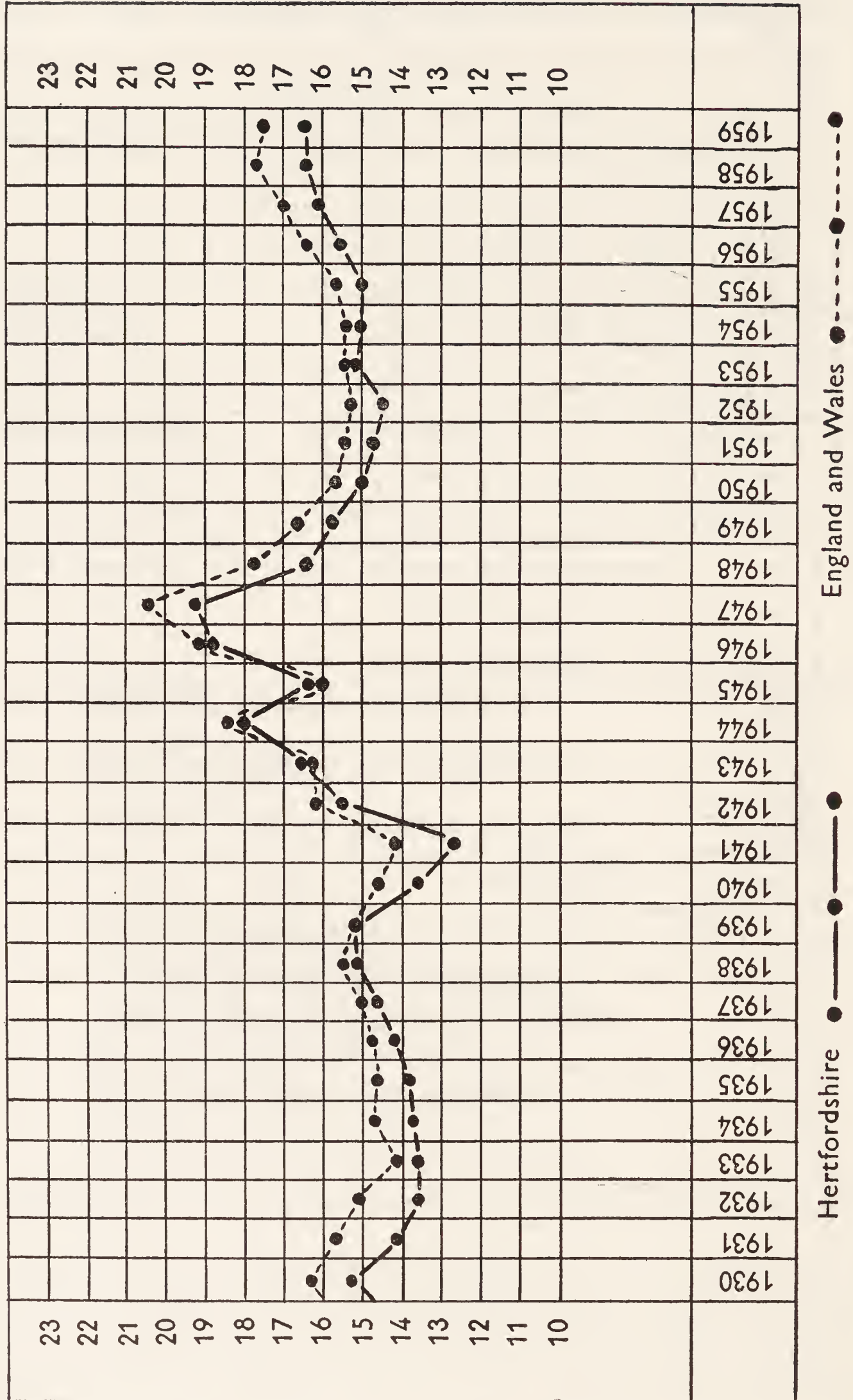


TABLE 5.—LIVE BIRTHS AND INFANT DEATHS, 1959.

	A. Live Births					B. No. of Infant Deaths (under one year)					C. No. of Infants in B who died under four weeks.					
	Legitimate		Illegitimate		Total	Legitimate		Illegitimate		Total	Legitimate		Illegitimate		Total	Rate
	Males	Fe- males	Males	Fe- males		Males	Fe- males	Males	Fe- males		Males	Fe- males				
Boroughs .	1,698	1,502	70	62	3,332	32	15	—	—	47	24	10	—	—	34	10.20
Urbans .	3,252	3,122	126	106	6,606	69	46	3	2	120	56	32	3	1	92	13.92
Rurals .	1,948	1,802	79	83	3,912	35	26	1	2	64	26	17	—	1	44	11.25
County .	6,898	6,426	275	251	13,850	136	87	4	4	231	106	59	3	2	170	12.27

TABLE 6.
DEATH RATE.
(per 1,000 population.)

Year	Hertfordshire								England and Wales Rate
	Boroughs		Urbans		Rurals		County		
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	
1944-53 (average for ten years).	1,667	11·0	2,760	10·1	1,607	9·7	6,034	10·2	11·6
1954 .	1,663	10·0	2,737	9·1	2,202	11·5	6,602	9·8	11·3
1955 .	1,752	10·4	2,990	9·6	2,347	10·8	7,089	10·3	11·7
1956 .	1,768	10·2	2,998	9·3	2,523	11·1	7,289	10·2	11·7
1957 .	1,741	9·7	3,033	9·1	2,355	11·5	7,129	9·6	11·5
1958 .	1,851	10·1	3,129	9·0	2,365	10·2	7,345	9·7	11·7
1959 .	1,924	10·3	3,212	8·9	2,367	10·0	7,503	9·6	11·6

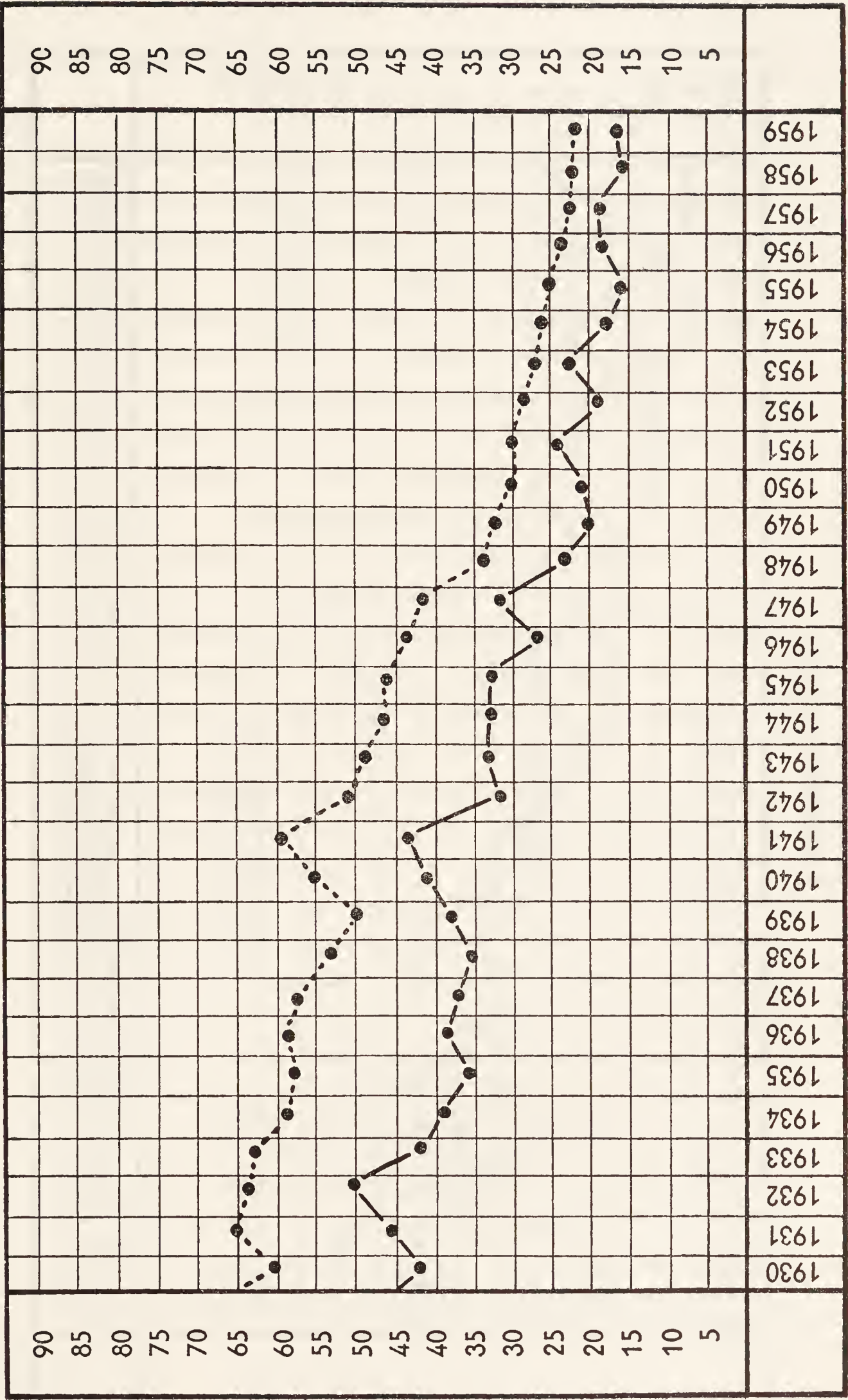
TABLE 7.
STILL-BIRTH RATE.
(per 1,000 births.)

Year	Hertfordshire								England and Wales Rate
	Boroughs		Urbans		Rurals		County		
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	
1944-53 (aver- age for ten years) .	58	22.2	94	21.0	58	20.6	210	21.1	22.5
1954 . .	64	23.7	95	20.6	69	20.7	228	21.4	24.0
1955 . .	50	17.7	89	18.1	77	23.0	216	19.5	23.1
1956 . .	61	20.6	114	20.8	67	18.6	242	20.1	23.0
1957 . .	57	18.5	115	19.4	74	19.5	246	19.2	22.5
1958 . .	74	22.4	124	18.7	73	18.4	271	19.5	21.6
1959 . .	56	16.5	126	18.7	76	19.1	258	18.3	20.7

TABLE 8.
INFANT MORTALITY.
(Deaths under 1 year per 1,000 live births.)

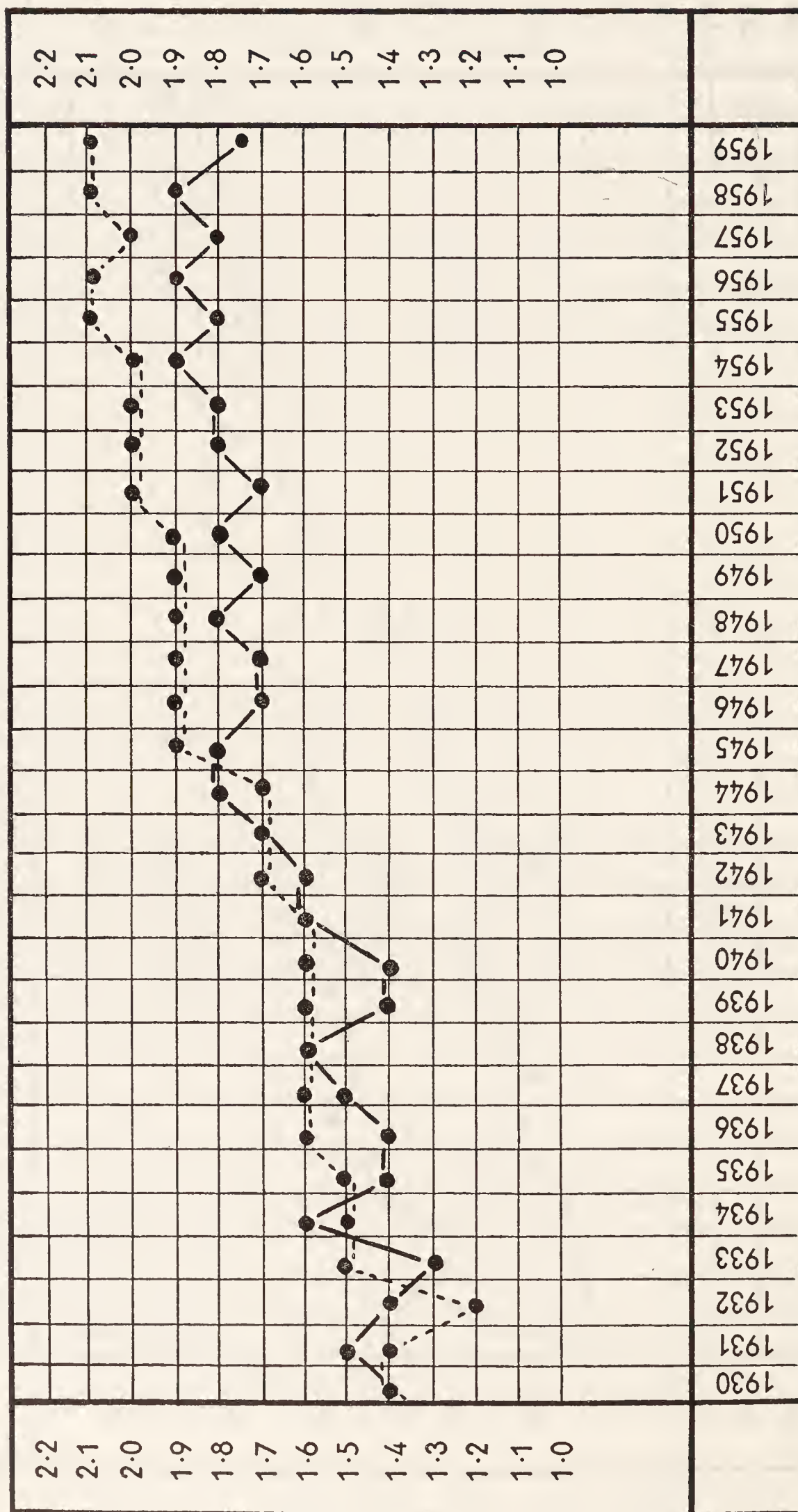
Year	Hertfordshire								England and Wales Rate
	Boroughs		Urbans		Rurals		County		
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	
1944-53 (average for ten years)	66	26	113	26	69	25	248	25	36
1954	45	17	81	18	57	17	183	18	26
1955	44	16	85	18	50	15	179	16	25
1956	46	16	102	19	66	19	214	18	24
1957	59	20	107	18	69	19	235	19	23
1958	51	16	94	14	79	20	224	16	23
1959	47	14	120	18	64	16	231	17	22

TABLE 9.—INFANT MORTALITY RATE, 1930-1959.
Per 1,000 Live Births.



Hertfordshire ●——● England and Wales ●- - -●

TABLE 10.—CANCER DEATH RATE, 1930-1959.
Per 1,000 Population.



Hertfordshire ●————● England and Wales ●-----●

DEATHS FROM CANCER OF LUNGS AND BRONCHUS.

Year	Males			Females		
	Total deaths	Deaths from Cancer of Lungs and Bronchus	Ratio of 3-2	Total deaths	Deaths from Cancer of Lungs and Bronchus	Ratio of 5-4
	2	3		4	5	
1950 .	3,010	126	24	3,009	25	120
1951 .	3,255	151	21	3,047	22	139
1952 .	3,078	169	18	3,027	29	104
1953 .	3,495	188	18	3,378	34	99
1954 .	3,377	184	18	3,225	32	101
1955 .	3,412	212	16	3,667	36	102
1956 .	3,590	208	17	3,699	39	94
1957 .	3,607	252	14	3,522	37	95
1958 .	3,634	258	14	3,711	37	95
1959 .	3,710	271	14	3,793	42	90

TABLE 11.
MATERNAL MORTALITY

Year	Hertfordshire			England and Wales Rate
	No. of Live and Still Births	No. of Maternal deaths	Rate per 1,000 Live and Still Births	
1950 .	9,359	10	1.1	0.9
1951 .	9,433	3	0.3	0.8
1952 .	9,525	6	0.6	0.7
1953 .	9,993	5	0.5	0.8
1954 .	10,652	12	1.1	0.7
1955 .	11,090	5	0.5	0.6
1956 .	12,034	6	0.5	0.6
1957 .	12,784	5	0.4	0.5
1958 .	13,889	6	0.4	0.4
1959 .	14,108	5	0.4	0.4

TABLE 12.
HEART DISEASE DEATH RATE.
(per 1,000 population.)

Year	Hertfordshire							
	Boroughs		Urbans		Rurals		County	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate
1944-53 (aver- age for ten years) .	520	3.4	772	2.8	491	3.0	1,783	3.0
1954 . .	530	3.2	846	2.8	704	3.5	2,080	3.1
1955 . .	585	3.5	957	3.1	817	3.9	2,359	3.3
1956 . .	573	3.3	937	3.0	823	3.8	2,333	3.2
1957 . .	533	3.0	947	2.8	798	3.5	2,278	3.1
1958 . .	591	3.2	986	2.8	734	3.2	2,311	3.0
1959 . .	546	2.9	995	2.8	741	3.1	2,282	2.9

TABLE 13.

NOTIFICATIONS OF INFECTIOUS DISEASES, 1959. (CORRECTED.)

District.	Scarlet Fever	Whooping Cough	Acute Poliomyelitis		Measles	Diphtheria	Acute Pneumonia	Dysentery	Smallpox	Acute Encephalitis		Enteric or Typhoid	Paratyphoid	Erysipelas	Meningococcal Infection	Food Poisoning	Puerperal Pyrexia	Ophthalmia Neonatorum	Chicken Pox*	Malaria	Undulant Fever	Infective Hepatitis	Wells Disease	Tuberculosis		Total for Districts
			Paralytic	Non- Paralytic						Infective	Post- Infective													Pulmonary	Non- Pulmonary	
Boroughs—																										
1 Hemel Hempstead	39	10	—	—	1,483	—	8	7	—	—	—	1	3	—	—	—	3	1	—	—	—	—	—	21	3	1579
2 Hertford	10	—	—	—	395	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	1	411
3 St. Albans	12	34	—	—	797	—	36	11	—	—	—	—	—	2	—	13	—	1	—	—	—	—	—	30	1	940
4 Watford	32	12	10	6	883	—	53	9	—	—	1	—	4	—	2	38	12	—	—	—	—	—	—	75	5	1143
Totals Boroughs .	93	56	10	6	3,558	—	99	27	—	—	1	1	9	9	2	51	15	2	2	—	—	—	4	129	10	4,073
URBANS—																										
1 Baldock	2	—	—	—	185	—	3	—	—	—	—	1	4	—	1	—	—	—	—	—	—	—	—	3	1	200
2 Barnet	13	6	1	—	396	—	38	16	—	—	—	—	—	—	1	10	30	—	—	—	—	—	—	12	1	532
3 Berkhamsted	6	5	—	—	337	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	1	362
4 Bishop's Stortford	11	8	—	—	75	—	4	—	—	—	1	—	—	—	—	19	1	—	—	—	—	2	—	6	1	128
5 Bushey	12	2	1	—	121	—	23	2	—	—	—	—	—	—	—	1	30	—	—	—	—	—	8	—	200	
6 Cheshunt	57	16	—	—	713	—	40	14	—	—	—	1	5	—	1	18	3	3	—	—	—	—	10	—	881	
7 Chorleywood	—	3	1	—	92	—	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	3	—	101	
8 East Barnet	85	6	2	—	483	—	24	35	—	—	—	—	—	3	1	9	1	—	142	—	—	—	16	—	805	
9 Harpenden	15	18	—	—	395	—	14	2	—	—	—	—	—	1	—	—	—	—	—	—	—	—	5	—	453	
10 Hitchin	2	5	—	—	346	—	7	—	—	—	—	—	—	8	—	1	4	—	—	—	—	—	4	—	367	
11 Hoddeson	26	5	—	—	347	—	10	2	—	—	—	—	—	—	—	2	—	—	—	—	—	—	7	2	411	
12 Letchworth	6	—	—	—	573	—	7	—	—	—	—	—	—	1	—	10	—	—	—	—	—	—	7	2	595	
13 Rickmansworth	1	8	—	—	122	—	2	—	—	—	—	—	—	—	—	10	—	—	—	—	—	—	7	2	153	
14 Royston	—	—	—	—	17	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	20	
15 Sawbridgeworth	4	6	—	—	26	—	3	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	2	—	47	
16 Stevenage	77	4	—	—	767	—	15	1	—	—	—	—	—	2	—	1	2	—	—	—	—	—	1	3	901	
17 Tring	8	2	—	—	72	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	21	—	85	
18 Ware	2	—	—	—	102	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	2	1	108	
19 Welwyn Garden City	25	7	2	—	440	—	14	23	—	1	—	—	—	4	1	—	—	1	—	—	—	—	9	—	527	
Totals Urbans .	352	101	7	—	5,609	—	209	97	—	1	—	2	40	40	5	72	72	5	142	—	—	—	15	131	15	6,876
RURALS—																										
1 Berkhamsted	1	10	—	—	114	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	3	—	128	
2 Braughing	9	2	—	—	266	—	10	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	291	
3 Elstree	54	6	—	—	202	—	3	10	—	—	—	—	—	—	—	7	1	—	—	—	—	—	21	1	305	
4 Hatfield	35	7	—	—	556	—	9	10	—	—	—	—	2	—	—	—	1	—	—	—	—	—	12	2	634	
5 Hemel Hempstead	—	2	—	—	114	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	122	
6 Hertford	6	2	—	—	241	—	16	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	2	—	269	
7 Hitchin	19	12	—	—	297	—	10	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	3	—	346	
8 St. Albans	29	10	—	—	897	—	12	16	—	—	—	—	3	—	—	1	3	—	—	—	—	—	11	1	986	
9 Ware	19	5	—	—	209	—	7	74	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	319	
10 Watford	50	18	3	—	271	—	21	24	—	—	1	—	—	—	1	5	—	—	—	—	—	—	36	1	431	
11 Welwyn	—	—	—	—	18	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	19	
Totals Rurals .	224	74	5	—	3,185	—	88	134	—	—	1	—	7	7	1	13	7	—	—	—	—	8	—	96	7	3,850
Totals County .	669	231	22	6	12,352	—	396	258	—	1	2	1	3	56	8	136	94	7	142	—	—	27	—	356	32	14,799

TABLE 14.

*NATIONAL HEALTH SERVICE ACT, 1946.***Notes on Statistical Return to Ministry of Health (Form L.H.S. 27).**

Each year the Health Department completes for the Ministry of Health a Return in the form of a statistical summary of the work done in connection with the services administered under Part III of the National Health Service Act, 1946. Comment on the particular services will be found in the body of the report.

	1957.	1958.	1959.
Actual Births :—			
Notified	13,887	15,136	15,058
Live	13,638	14,863	14,782
Still	249	273	276
Premature Births :—			
Notified	745	882	820
Midwives :—			
Domiciliary :—			
Employed by local Health Authority .	125	123	132
(Representing whole-time equivalent) .	53·66	52·29	58·4
Employed by Hospital Management Committee	6	6	6·5
Private Practice	17	12	11
Institutional :—			
Employed in hospitals.	118	128	142
Employed in nursing homes	12	10	13
Gas and Air Analgesia :—			
Midwives qualified to administer gas and air analgesia	252	257	283
Ante-Natal Clinics :—			
Sessions per month	82	81·7	72·7
Attendances made	11,538	12,612	11,350
Infant Welfare Centres :—			
Sessions per month	456	479	542
Attendances made	210,429	225,161	239,196
Under 1 year	142,512	160,712	167,181
1 to 2 years	36,069	35,596	40,424
2 to 5 years	31,848	28,853	31,591
Health Visitors :—			
Number employed	133	135	140
(Representing whole-time equivalent) .	66·16	68·68	79·8
Clinic Nurses	22	27	32
(Representing whole-time equivalent) .	6·6	8·1	9·6
Home Nurses :—			
Number employed	165	168	179
(Representing whole-time equivalent) .	97·82	112·16	109·5
Day Nurseries :—			
Approved places : 0-2 years	184	169	169
2-5 years	286	251	251
On register at 31st December : 0-2 years .	90	97	91
2-5 years	193	178	205
Average daily attendances : 0-2 years .	75	71	76
2-5 years	163	152	150
Home Helps :—			
Employed whole-time	—	16	19
Employed part-time	632	642	659
Nurseries and Child Minders Act, 1948 :—			
Premises registered	17	25	27
Minders registered	59	113	125
Daily Minders receiving fees from the Authority at 31st December	3	12	7
Number of Children cared for under County Council Scheme	5	16	10
Registered Nursing Homes	25	23	21

Administrative and Organizing Staff are not included in the above table.

SECTION 21.—PREMISES

In October, 1956, the Health Committee considered a five-year development plan for Health Services buildings. It is interesting to note that despite a virtual ban on capital works for some two years, much of the plan has been fulfilled. The five-year programme mentioned ten Health Centres, including two conversions, one Day Nursery, three Junior Training Centres, and twelve nurses' houses. At the time of writing this Report, the following list shows the progress achieved on the individual projects.

Hemel Hempstead Junior Training Centre	Work completed.
Hertford Health Centre	Work completed.
Oxhey Principal Health Centre and General Practitioners' Surgeries.	Work completed.
Stevenage Principal Health Centre	Expected date of completion, July, 1960.
Letchworth Health Centre	Dental Unit provided.
Ware Health Centre	Dental Unit provided.
East Barnet Principal Health Centre	Building work in progress.
Hitchin Principal Health Centre	Necessary approvals received.
Hatfield Principal Health Centre	Necessary approvals received.
Day Nursery, Welwyn Garden City	Necessary approvals received.
Hitchin Junior Training Centre	Necessary approvals received.
Hoddesdon Junior Training Centre	Necessary approvals received.

Twelve nurses' houses have already been erected or purchased.

In addition to the building work envisaged in the development plan, Health Centres are being erected at Abbots Langley and Cheshunt, a dental unit has been provided at Baldock and approval for work to proceed has been received for new Health Centres at Berkhamsted and Vesta Avenue, St. Albans, and for the conversion of the Drill Hall at Bishop's Stortford to provide a Health Centre.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN.

TABLE 15.

INFANT WELFARE CENTRE ATTENDANCES.

	No. of Centres	Sessions Held	Doctors' Attendances	No. of Children who Attended	Children's Attendances	
					Total	Average per Session
1955 . . .	127	4,827	3,595	24,617	180,585	37
1956 . . .	142	5,078	3,829	26,872	196,813	39
1957 . . .	144	5,296	4,009	29,971	210,429	40
1958 . . .	147	5,696	4,241	31,406	225,161	40
1959 . . .	150	6,117	4,446	31,492	239,196	39

RECUPERATIVE CENTRES AND TRAINING HOMES.

During the year three families were sent to this type of establishment—a mother and baby for five weeks, a mother and four children for six and a half weeks, whilst one family of a mother and four children placed in a training school at the end of October was still there at the 31st December. Nursing Officers and Health Visitors keep these families under supervision and case conferences are held with the Families Welfare Officer, Probation Officer, N.S.P.C.C. representatives, and other interested social workers. Unfortunately it appears that one case has not maintained the beneficial effect of the guidance and instruction given at the Home.

DAY NURSERIES.

TABLE 16.

			<i>Number of Approved Places. at 31st December, 1959.</i>			<i>Average No. on Register.</i>	<i>Average Daily Attendances.</i>
			<i>0.2 years.</i>	<i>2-5 years.</i>	<i>Total.</i>		
Barnet . . .	53 Wood Street .		20	50	70	30	29
Boreham Wood	Elstree Way .		24	26	50	43	34
Bushey . . .	London Road .		30	50	80	31	25
Letchworth .	1 Norton Way North		20	30	50	17	14
St. Albans .	Royal Road .		20	20	40	36	29
Waltham Cross	157 High Street .		20	20	40	23	20
Watford . . .	Leggatts Way .		—	—	—	—	—
Watford . . .	St. Albans Road (Beechwood).		15	35	50	52	42
Welwyn Garden City.	Woodhall Lane .		20	20	40	39	33
			<u>169</u>	<u>251</u>	<u>420</u>	<u>271</u>	<u>226</u>

The average daily attendance during 1959 was 226 (76 under two years of age, 150 two to five years of age), as compared with 223 (71 under two years of age, 152 two to five years of age) in 1958.

At 31st December, 1959, the number of staff employed was sixty-two, an increase of one since December, 1958, and including fourteen nursery students.

The Committee has maintained its policy of accepting into the Nurseries children who qualify for admission under one of our special categories. Financial need is not accepted as a reason for admission. This policy results in empty places at the Day Nurseries and though staff is adjusted to the average number of children on the register many of the overheads remain unaffected and consequently the cost per place is high.

OPHTHALMIC CLINICS.

During the year 144 children under five were seen for the first time at the Eye Clinics and a further 349 children were seen for re-examination. The Ophthalmologist prescribed spectacles for eighty-nine children.

THE MATERNITY AND CHILD WELFARE DENTAL SERVICE, 1959.

The staffing position within the Maternity and Child Welfare Service has shown a small improvement over the previous year and this has enabled a further limited development to be achieved. The staff available to treat mothers and young children stood at six whole-time and twenty-seven part-time officers at the close of the year ; the equivalent in whole-time personnel being approximately fifteen. Staff changes were as frequent as in previous years. Two full-time and ten part-time officers joined the staff but these additions were offset by the resignation of ten part-time officers, three of whom had joined the staff during the year and seven from previous years. One officer on reaching retirement age transferred to a part-time post. The net result of all these changes was a slightly more favourable position at the close of the year. These figures relate to dental officers whose services are shared between the Maternity and Child Welfare Service and the School Dental Service in premises of joint use.

Four new clinics situated at Oxhey, Hemel Hempstead, Letchworth, and Ware were brought into use during the year. The Letchworth and Ware Clinics were equipped with full X-ray facilities and in the case of the latter

clinic, arrangements were made for patients to attend for radiographic examination from adjoining areas. The total number of clinics at which treatment was available for mothers and young children was twenty-nine.

A high-speed drill of the turbine type was installed in the Letchworth clinic and in the light of an extended trial proved to be a distinct advance on the conventional drill. Experience with this new apparatus showed that conservative treatment was more readily tolerated by mothers and that it was acceptable to pre-school children. There can be little doubt that any improvement in operating technique as the result of advances in equipment design should be introduced whenever possible in order to reduce the fear of the filling operation and thus make it more acceptable to the apprehensive patient. These advantages are to be extended to additional clinics in the future by the installation of further high-speed drills.

Short talks at the chairside on dental care and correct eating habits have been given by dental officers to mothers concerning their own and their children's teeth, this being an important aspect of the service in preventive dentistry. It is acknowledged that mothers are particularly receptive to advice and information given at such time and this should lay the foundation of the mother's interest in her child's dental welfare for the future.

The Minister of Health in the foreword to his 1958 Report stresses the importance of dental care in the following words :—

“ It would be a great gain to the country if, instead of pre-occupation with disease and drugs and hospitals, people thought more of preserving good health and acting on the advice available to them on how this may best be done. Nowhere is the need more noticeable than in the field of dental care, where the toothache and dentures of to-morrow are the consequence of to-day's neglect of sensible habits, daily personal care, and regular conservative treatment.”

The introduction on 1st April of the supply of dentures to expectant and nursing mothers has enabled them to obtain comprehensive treatment to the County Council's clinics. Prior to this date treatment was restricted at conservative and surgical work only and this had the effect of limiting the number of patients wishing to use the service. Although only a small number of dentures has been supplied this year, it may be noted that more than twice the number of mothers received treatment compared with the previous year.

Particulars of the work carried out during the year are set out below :—

Expectant and Nursing Mothers.

Number of mothers examined	189
Number of mothers needing treatment	173
Number of mothers treated	173
Number of mothers made dentally fit	104
Number of attendances for treatment	407
Scaling and gum treatment	74
Fillings	300
Extractions	153
General anaesthetics	22
Dentures, full upper or lower	7
„ partial upper or lower	10

Children under 5.

Number of children examined	1,810
Number of children needing treatment	1,384
Number of children treated	1,146
Number of children made dentally fit	1,113
Number of attendances for treatment	2,633
Scaling and gum treatment	8
Fillings	1,598
Silver nitrate treatment	586
Extractions	991
General anaesthetics	541

Progress, although unspectacular, has been maintained and the above figures show a general improvement upon the 1958 totals. Further progress is dependent upon an improvement in the staffing position which at present is more than 50 per cent under strength.

CARE OF UNMARRIED MOTHERS.

The report which follows has been prepared by the Almoner, who deals with the unmarried mothers.

During 1959 I have recorded as new cases 229 unmarried mothers and mothers of illegitimate children. Of these 103 were dealt with by Moral Welfare Workers who made Mother and Baby Home arrangements and applied to the County Council for coverage, and 126 were dealt with directly by me. By reference to my report for 1958 it will be noted that applications from Moral Welfare Workers for coverage of charges in Mother and Baby Homes has more than doubled. The figure for 1958 was forty-nine as against 103 in 1959.

Two hundred and two of the 229 new cases were known during pregnancy and twenty-seven after delivery, and were referred to me by Hospitals, Ante-Natal Clinics, General Practitioners, Health Visitors, Moral Welfare Workers, Probation Officers, Children's Officers, and in a few instances came on their own initiative, having heard of the Service from friends. In nineteen cases the baby was the second illegitimate child, in five cases the third, while in four cases the current baby was the fifth. In thirty-three instances the mothers were married, but the child not their husbands, and two others were widows.

Owing to my being away on sick leave I have not had personal dealings with as many girls as usual, but including girls with whom I have dealt personally, and with whom the Health Department staff dealt in my absence, eighty-eight have had active help of various kinds. This includes :—

(a) Vacancies arranged early in pregnancy in Hostels where girls can live and go out to work and be self-supporting until the time comes for admission to a Mother and Baby Home.

(b) Vacancies arranged in Mother and Baby Homes.

(c) Help in regard to affiliation.

(d) Help to provide layettes, etc. where there is financial need.

(e) Help and advice on the problems of plans for the care of the baby where a girl prefers to remain in her own home to entering a Mother and Baby Home.

In regard to my absence on sick leave, I should like to express my sincere appreciation of the excellent help received in carrying on my work in my absence from the Health Department staff, Children's Officers, Hospital Almoners, Moral Welfare Workers, and others.

In addition to the girls catered for directly by the Health Department, 103 have been placed by Moral Welfare Workers in Mother and Baby Homes for whom we have accepted financial responsibility. It will be remembered that the girls pay from maternity allowance when eligible £2 a week antenatally and £2 7s. 6d. post-natally, and in twenty-one cases additional payment has been made by relatives and putative fathers to a total of £137 7s. 6d.

The total of foreign girls in the newly recorded cases was not high—fourteen Irish, of whom all but two became pregnant in this country. The two who

came from Eire, already pregnant, were induced to return to their own country after arrangements had been made for their reception there. Two were Indian, four Italian, two African, five Jamaican, and one Hungarian. One of the Italian girls has been required by the Home Office to return to Italy in January, 1960, before confinement.

In addition to the newly recorded cases, seventy-four remained current from the previous year, and were in touch with the Almoner on various matters where help or advice was needed.

In June, 1959, the Health Department's current arrangement to rent four beds in the newly opened Diocesan Home at Streatley came into force, and the contract with the previous Home in St. Albans ceased in the following September. I should like to say how greatly I have valued the help of the Matron of that Home over the years in which she has cared for our girls, and am now also finding the ready help and co-operation at Streatley most valuable. So far the reduced number of beds at our disposal has been adequate, but in this type of work it is inevitable that there should be fluctuation of demand, and it is almost impossible to forecast accurately the beds required at any given time, owing to incorrect delivery dates or changes of plan on the part of our clients.

During the year vacancies in Mother and Baby Homes were arranged as follows :—

					<i>A.N.</i>	<i>Admitted. P.N.</i>	<i>Total.</i>
<i>Per Almoner.</i>							
(1) St. Albans Home	.	.	.	.	10	12	22
(2) Streatley	.	.	.	.	8	4	12
(3) Other Homes	.	.	.	.	13	—	13
<i>Per Diocesan Workers at H.C.C. Charge.</i>							
(1) Streatley	.	.	.	.	5	7	12
(2) Other Homes	.	.	.	.	91	—	91
Total	.	.	.	.	<u>127</u>	<u>23</u>	<u>150</u>

Provisional arrangements were made in twenty-one other cases, but subsequently cancelled owing to changes of plan such as marriage, removal from the district, etc. In all but two out-County Homes used, adoptions are arranged by workers in connection with the Home, and seven such have been arranged. In addition, I have arranged adoption in fifteen cases, and through the Children's Officer nine others have been fostered, while the remainder of the babies have been accepted into the homes of their mothers. The prompt help given by the Children's Department in placing babies with foster parents continues to be greatly appreciated.

During the summer I was approached by Miss Penelope Hall, lecturer in Social Science at Liverpool University, and also a member of the Selection Board in connection with Almoners' training. Miss Hall is organizing a survey of moral welfare services at the request of the Moral Welfare Council who wish the survey to be undertaken by an impartial observer. Two areas, Liverpool and Hertfordshire, have been selected for this purpose, and Miss Hall wished to investigate, among other things, the relationship in this County between Diocesan and Local Authority work. We accordingly met and had full and interesting talks on the subject, and early in January Miss Hall's assistant, Miss Howes, is to spend a week with me to study my methods and records of

work. It is not anticipated that the report of this survey will be ready for some time, but it should be helpful and full of interest when available.

CHILD DEVELOPMENT CLINIC.

In submitting the annual report on the work of the Child Development Clinic for the year ending 31st March, 1960, the Divisional Medical Officer comments :—

The sessions continue to be of great assistance to the young and inexperienced mothers in the town whose children have minor behaviour problems, and I am sure that the health visitors learn a lot from their association with the clinic.

Two encouraging trends have developed during the past year, the first being regular consultation sessions and exchange of views between Mrs. Baker and the Health Visiting team which may be regarded as parallel to the group discussions with Dr. Bearcroft on adult mental health problems, and secondly, the increasing referrals directly from medical practitioners which illustrate the realization of the value of these sessions to young mothers by the family practitioners. At the request of one of the practitioners a notice of referral is being drawn up which could be sent to the medical practitioners in each case so that they are kept fully informed and do not feel that we are acting behind their backs even in advising on these relatively minor problems.

In conclusion I would like to place on record our appreciation of the co-operation and advice which Mrs. Baker is always so ready to give to us and enables us to feel that this is indeed part of our team approach to mental health work in Welwyn Garden City.

Mrs. Baker's report reads :—

Interviews this year have been mainly in the Health Centre with a few home visits where this seemed profitable. There is now not only a working relationship with the Health Visitors of the area but an active partnership. Since Christmas, 1959, regular group discussions have been held, proving at once enjoyable and fruitful. Neither the sessions with the Health Visitors nor interviews with individual clients are intended to be advisory ; rather are they aimed at exchange of views to increase psychological awareness and to further social and emotional relationships.

This year more referrals have come by way of the general practitioners and it seems that the preventive and educative aspects of the work are better understood. As usual, it is most often the first child of a young couple that is referred—usually struggling with his own developing self-assertion. Mothers sometimes need support and encouragement to understand new levels of growth in their young children and it is found that with increasing confidence, family relationships become richer and the children more secure.

Six children have been transferred to the Child Guidance Clinic which is a pointer to the good selection of cases brought first to the Child Development Clinic.

In conclusion, it is fairly well understood to-day that the work with under fives is not primarily a matter of curing a tiresome symptom but rather of adjusting family relationships, in particular the furthering of the relationship between mother and child. Symptoms which bring a mother in the first place may nevertheless be severe, or go on for too long for the age and stage of the particular child. To avoid further hold-up in emotional and social development it would seem helpful to make an assessment at least and perhaps offer a number of interviews. This is the more so, because school entry cannot be far away for most of the children seen and, as is often the case, many find school unnecessarily hard, being too unconfident and too babyish to enjoy what is offered.

Number of cases—Old	20
New	34
	—
	54
	—

Total number of interviews (including 14 after-care) 227

Presenting Symptoms.

Antagonistic and aggressive behaviour . . .	17
Tempers	6
Sleep disturbances	7
Enuresis	5
Bowel difficulties	2
Feeding difficulties	3
Habit disorders (nail biting, etc.) . . .	6
Parental outlook faulty (poor relationship with mother) (no particular symptom) . . .	5
Speech difficulties	3
	—
	54
	—

Source of Referral.

Health Visitors	34
A.C.M.O.	2
General Practitioners	10
School Medical Officer	6
Probation Officer	1
Hospital	1
	—
	54
	—

Discharges.

Improved	9
Lapsed attendances	1
Refused follow-up appointment	7
Referred to Child Guidance Clinic	6
Discharged but may need Child Guidance later	1
Mother referred back to private doctor	2
Discharged but transferred to Health Visitor	6
Family moved	1
	—
	33

Current cases	21
	—
	54
	—

WELFARE FOODS.

Table 17 shows the total issues of Welfare foods during 1959.

TABLE NO. 17.

	National Dried Milk Tins	Cod Liver Oil Bottles	Vitamin A and D Tablets Packets	Orange Juice Bottles
Issued to beneficiaries against coupons	137,615	51,641	50,457	520,940
Issued to hospitals and day nurseries	2,104	343	24	1,557
Totals	139,719	51,984	50,481	522,497

There has been a reduction of some 10 per cent in the number of issues of both National dried milk and cod liver oil, an increase of 10 per cent in issues of vitamin tablets, whilst the number of orange juice bottles sold is almost exactly the same as last year. These figures are somewhat misleading for the

number of beneficiaries is not constant in a County whose total population is increasing by some 23,000 each year.

The excellent work done by the voluntary workers in this Service is worthy of mention as 90 per cent of all the distribution centres employ no paid staff.

DOMICILIARY NURSING SERVICES.

Nursing Staff at 31st December, 1959.

	<i>Whole-time.</i>	<i>Part-time.</i>
Administrative and Supervising	10	—
Health Visiting and School Nursing	92	3
Health Visitor/School Nurse/Midwife/Home N.	35	—
Midwifery and Home Nursing	83	—
*Midwifery	20	1
Home Nursing	29	32
Tuberculosis visiting	10	—
Clinic Nurses	—	32
Student Home Nurses	5	—
*Pupil Midwives	35	—
Vacancies	19	—

* Includes six full-time, one part-time midwife and ten pupil midwives employed in the Watford area by the West Herts Hospital Management Committee as agents of the Local Health Authority.

Four members of the Domiciliary Nursing Service were awarded the Queen's Long Service Medal for twenty-one years' service as a Queen's Nursing Sister.

	<i>Service with Herts County Council.</i>
Miss M. A. McClements	8 years
Miss T. G. G. Driscoll	2 years
Miss M. Skidmore	17½ years
Miss M. I. Snell	18½ years

Students.

At the request of various training organizations arrangements were made for students taking post-qualification social studies, nursing administrative, health visitors, and district training courses, to spend from three days to a fortnight seeing the methods of administration and field work in this County.

Forty-three students spent 242 days in Hertfordshire.

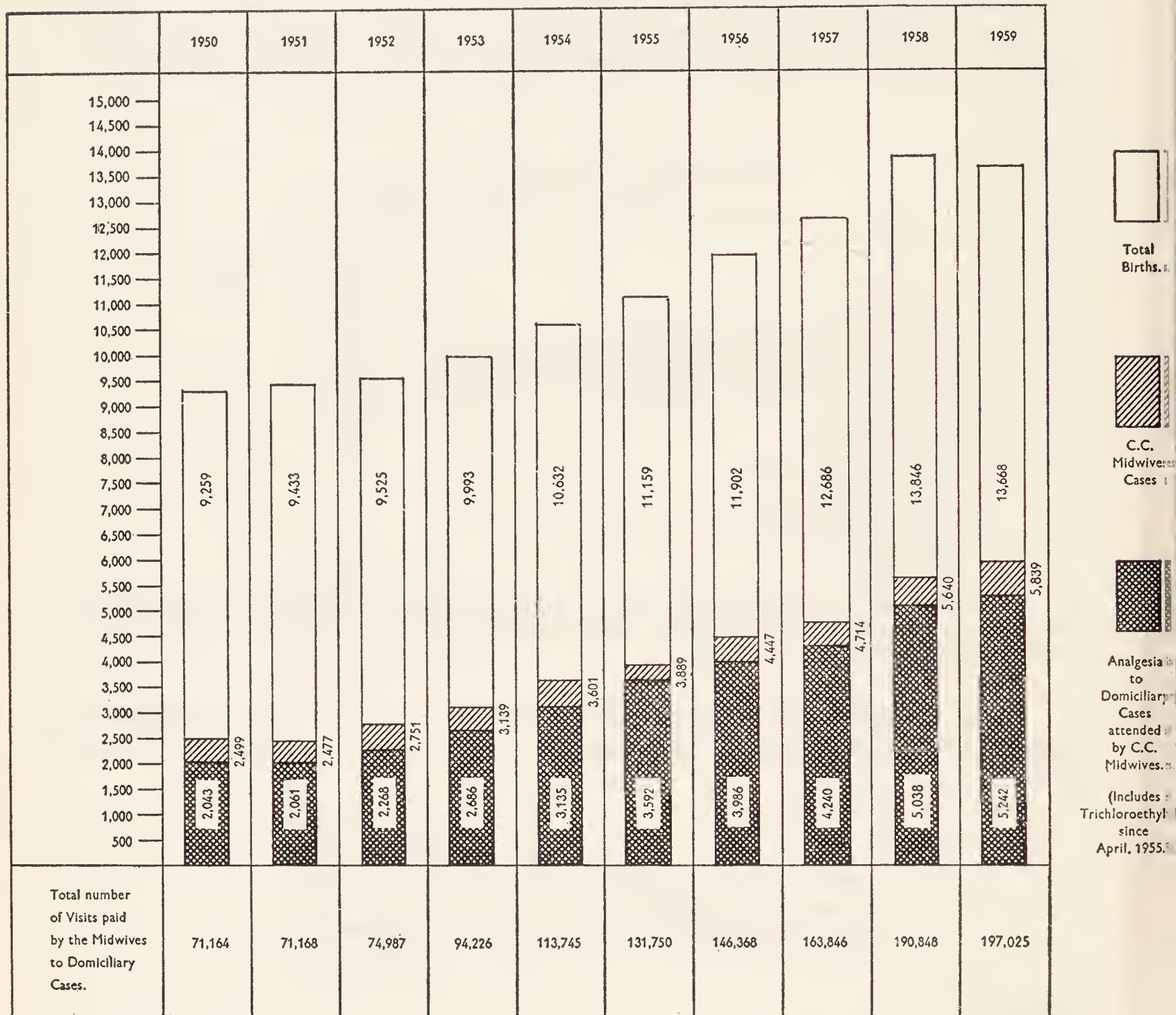
Housing.

Domiciliary nurses are given the choice of furnished or unfurnished accommodation. It is usually found that nurses who are entering for the first time into domiciliary service prefer furnished premises. Thirty-six nurses occupy furnished accommodation, other than in the Watford and St. Albans Homes. Sixty-four district nurse-midwives occupy unfurnished flats or houses, while thirty-five nurses prefer to make their own private arrangements.

SECTION 23.—MIDWIFERY.

As will be seen from the following table, the County Council Midwives attended 5,839 confinements, 555 of which were Watford domiciliary midwives' cases. In addition, 30 cases were attended by private Midwives. All these figures relate to confinements attributable to Hertfordshire.

TABLE 18.



Cases discharged from hospital before the twelfth day are put under the domiciliary midwives care.

In 1959, 7,799 Hertfordshire mothers were confined in hospitals or nursing homes and 3,541 were discharged before the twelfth day. The midwives made 18,337 visits to these cases. Mothers discharged after the twelfth day are visited on the following day by the health visitor for the area.

Cases Discharged from Hospital into District Midwives' Care.

	Hospital and Nursing Home Confinements of Herts Mothers.	Early Discharges from Hospital.	Total visits by District Midwives.
1955 . .	7,223	1,162	4,658
1956 . .	7,418	1,578	6,386
1957 . .	7,934	2,553	10,707
1958 . .	8,159	3,559	17,234
1959 . .	7,799	3,541	18,337

Since 1955 the number of cases discharged early from hospital has tripled, whereas the number of visits has increased fourfold. This may be accounted for in two ways—a tendency to discharge more cases before the tenth day and improved liaison between the hospital and local health authorities. Most hospitals now regularly notify the health department of all discharges before the fourteenth day, in accordance with the Ministry of Health's direction in 1953.

The Group Liaison Maternity Committees formed in 1956 to consider the arrangements for dealing, treating, and preventing toxæmia also brought about closer liaison in administrative matters.

At the request of hospitals 1,093 reports on home conditions were made by midwives in respect of applications for hospital maternity beds.

Over the nine years 1950–1958 the number of confinements attributable to Hertfordshire has risen year by year from 9,259 to 13,846, but for 1959 the number of birth notifications show a slight decrease to 13,668 confinements. The percentage of home confinements, however, is still increasing—42·7 per cent of the total in 1959 as compared with 41·5 per cent in 1958 and 34 per cent in 1954.

The increase in home confinements in 1959 is not in the new towns, as may be expected, but spread throughout the County. There has, in fact, been a decrease in new towns and other expanding areas, as will be seen by reference to the following table.

		1959	1959 %	1958 %	1954 %
			<i>Domiciliary.</i>	<i>Domiciliary.</i>	<i>Domiciliary.</i>
<i>Boreham Wood and Elstree</i>	Total . .	491			
	Domiciliary .	219	44·6	44·7	44·5
<i>Cheshunt Urban District</i>	Total . .	612			
	Domiciliary .	281	45·9	47·1	45·5
<i>Hatfield</i>	Total . .	463			
	Domiciliary .	176	38·0	42·1	26·0
<i>Hemel Hempstead</i>	Total . .	1,097			
	Domiciliary .	554	50·5	48·4	38·3
<i>Stevenage</i>	Total . .	993			
	Domiciliary .	639	64·3	66·6	51·2
<i>Watford and Oxhey</i>	Total . .	1,478			
	Domiciliary .	543	30·0	38·8	35·9
<i>Welwyn Garden City</i>	Total . .	668			
	Domiciliary .	292	41·0	42·2	26·0

Ophthalmia Neonatorum.

Six cases were notified during the year, three being home confinements and one in respect of a hospital case normally resident outside the County. None of the five children resident in Hertfordshire had vision impaired and all were considered to be satisfactory at the end of the year.

Postgraduate Courses.

In accordance with statutory regulations members of the staff attended postgraduate courses. One Divisional Nursing Officer attended the Supervisor of Midwives course in London and twenty-eight domiciliary midwives attended a week's course at a residential school.

Staff and Training of Pupil Midwives.

At the end of the year the number of domiciliary midwives employed was 139, representing the equivalent of 64·9, including six full-time and one part-time midwife employed by the West Herts Hospital Management Committee. Corresponding figures for 1958—129—58·29 and six.

Twenty-five midwives were paid the Midwives Training Grant for accepting responsibility for the district training of pupil midwives placed from the five Part II Midwifery Training Hospitals in this County. As from 1st January, 1959, the training allowance was increased from £20 to £30 per annum. One hundred and twenty-one pupil midwives completed the three months' district training; forty-five in the Watford area and seventy-six in other parts of the County.

Cost of Training Pupil Midwives.

In my 1958 report I stated that, as a result of the reapportionment of the cost of training pupil midwives, the cost to Hertfordshire had increased considerably. The total expenses incurred in connection with the second period of

training of pupil midwives throughout the country has now been apportioned by the Ministry of Health on the basis of numbers of domiciliary confinements in the area. The cost to Hertfordshire of training of pupil midwives is reflected in the following figures :—

	1955-56.	1956-57.	1957-58.	1958-59.
	£	£	£	£
Payments by Hertfordshire .	235	11,428	15,007	14,820
Repayment to Hertfordshire .	—	2,978	3,988	2,634*

* Provisional figure.

Relaxation Exercises and Ante-Natal Instruction Classes.

During 1959 forty-seven midwives attended the General Lying-in Hospital in London for two-day instruction in relaxation exercises. Of the 132 midwives directly employed by the County Council at 31st December, ninety-two or 70 per cent of the staff were trained to instruct expectant mothers in relaxation during pregnancy. At the end of the year regular ante-natal instructional sessions were held at sixteen centres in the County at which midwives made 646 attendances. Health Visitors made 496 attendances at these sessions, which are now held in Welfare Centres at Berkhamsted, Boreham Wood, East Barnet, Hatfield, Hemel Hempstead, Hertford, Hoddesdon, Redbourn, Rickmansworth, Sawbridgeworth, Stevenage (three centres), Waltham Cross, Watford, and Welwyn. In rural areas the district nurse/midwife/health visitor gives individual instruction to expectant mothers in their own homes.

General Practitioners' Ante-Natal Clinics.

The domiciliary midwives continued to attend the general practitioners' ante-natal clinics.

Co-operation between general practitioners and midwives was satisfactory and greater use was made of the ante-natal exchange record card introduced in 1958.

TABLE 19.

Analgesia in Domiciliary Midwifery.

USE OF INHALATION ANALGESICS IN DOMICILIARY PRACTICE.

Number of domiciliary midwives, (a) practising in the area at end of year, (b) qualified to administer inhalational analgesics in accordance with the requirements of the Central Midwives Board (a) (b)		Number of domiciliary confinements attended by midwives :—		Number of sets of apparatus for the administration of inhalational analgesics in use at end of year		Number of cases in which inhalational analgesics were administered by midwives in domiciliary practice during the year :—			
		When doctor was present at time of delivery of child	When doctor was not present at time of delivery of child			When doctor was present at time of delivery of child		When doctor was not present at time of delivery of child	
						Gas and air	“Tri-lene”	Gas and air	“Tri-lene”
* 150	145	1,208	4,661	142	8	1,010	123	3,893	236

* Note.—Five of the eleven midwives employed in private practice were not trained in gas and air analgesia.

Dangerous Drugs Regulations, 1954.

The following Table shows the percentage of patients who were given Pethidine during labour :—

	1952.	1953.	1954.	1955.	1956.	1957.	1958.	1959.
H.C.C. domiciliary midwives .	44.2	38.5	39.0	49.7	46.9	46.6	53.5	55.8
H.M.C. domiciliary midwives .	20.3	19.8	35.4	29.2	32.0	38.0	28.0	19.6
Private domiciliary midwives .	39.5	30.6	33.3	29.8	40.5	52.6	66.0	60.0

Ambulance Service—Emergency Child Birth.

The Ambulance Officer reports that seven births took place in ambulances ; one occurred when the ambulance was within the hospital grounds and medical assistance was quickly obtained. Ambulance men only were present in five cases.

There were twenty deliveries in the homes of patients booked for hospital confinement, either before or after the arrival of the ambulance. Of this group twelve deliveries were assisted by ambulance men only. One case was a breech delivery, ably dealt with by the ambulance crew.

Of the total of twenty-seven deliveries, assistance either by doctor and/or midwife was given :—

(a) *Doctor—*

Before birth	.	.	.	.	1
After birth	.	.	.	.	5

(b) *Midwife—*

Before birth	.	.	.	.	3
After birth	.	.	.	.	17

Midwives off Duty.

The Minister of Health directed that information regarding relief duty on night rota systems be given in this year's Annual Report.

At present the off-duty is thirty-eight consecutive hours each week and sixty consecutive hours every fourth week. The National recommendation made in 1948 was for thirty-six consecutive hours each week and sixty consecutive hours every fourth week. This allows two clear nights and the intervening day " off call " each week and three nights and the intervening two days every fourth week. The midwives work in groups of three or four for the purpose of relieving each other, but wherever possible relief nurse/midwives are also engaged.

Although it is considered desirable to improve on existing arrangements it has not yet been possible to do so, though we are always looking for opportunities to improve Midwives' conditions of service.

Towards the end of the year Dr. J. E. Elam, who had held the post of Honorary Adviser in Analgesia to the County for the past sixteen years, informed me that he would be leaving the County. I felt that his letter would be of interest to the Committee and it is quoted with his permission :

" I should like the County Council to know how much the work which they and their officers have done is appreciated and how much they have achieved.

It is exactly twenty-six years since we first started the analgesia work at Wellhouse Hospital.

Wellhouse Hospital worked in co-operation with R. J. Minnitt for the provision of pain relief in maternity, with gas and air analgesia. The Liverpool Maternity Hospital and the Wellhouse Hospital were the first hospitals to use this method, and in 1941 Wellhouse Hospital was the first to use Trilene analgesia.

During all this time we were so fortunate as to enjoy the unfailing support of the Hertfordshire County Council. You may remember that in the early days there was considerable opposition to the idea of self-administered analgesia.

I am quite convinced, having a very full knowledge of all the facts, that there would have been no analgesia to-day had it not been for the insistence and persistence of the Hertfordshire County Council.

We are under very great obligations to the Council, and I should be grateful if you would be so kind as to express my very sincere thanks to the County Council for all the support and encouragement which we have received.

To you personally we owe an immense debt of gratitude which I am sure is in some measure repaid by the knowledge which you must enjoy, of having so greatly improved the County Maternity Services. And when I say that 'we' are all infinitely indebted to you, I mean by 'we' all who are interested in the welfare of our mothers.

The Hertfordshire County Council and their officers have undoubtedly led a very great advance in our maternity services, and I do hope that those who took a leading part will not be altogether forgotten.

Our good friends, Lord Knutsford and Sir David Rutherford, were always ready to help, and did help very strongly at a very critical time.

In saying goodbye to the Hertfordshire County Council I would like to express my appreciation of all they and their officers have done for our mothers."

SECTION 24.—HEALTH VISITING.

The number of staff employed on health visiting work, including ten Tuberculosis Health Visitors, at 31st December, 1959, was 140, representing 79·8 full-time health visitors. These Officers are also engaged on School Nursing work. In addition, thirty-two part-time Clinic Nurses assist the Health Visitors. Nine students completed the Health Visitors training under scholarship (five as part of the combined Queen's Nurse/Health Visitor training). Eleven started Health Visitors training (three as part of the combined course).

Health Visitors paid 182,446 home visits to expectant mothers, children 0-5 years of age, the aged and chronic sick, and for miscellaneous reasons, including inquiries about the issue of equipment supplied through the medical loan scheme. 56,658 children under 5 years of age were visited in 1959, as compared with 55,032 in 1958 and 53,487 in 1957.

Of the 56,658, the number of children visited under one year of age was 14,294, being 676 more than the number of live births notified as Hertfordshire residents at the time of birth. The movement into new towns continues and accounts for the difference.

Ineffective visits numbered 27,205 as compared with 22,762 in 1958.

HEALTH VISITORS ATTENDANCES AT CLINIC SESSIONS AND INSTRUCTIONAL CLASSES.

	1959.	1958.
Child Welfare Centres	8,826	8,703
Ante and Post Natal Clinics	343	423
Tuberculosis Clinics	5	2
B.C.G. vaccination sessions	150	214
Small pox vaccination sessions	3	10
Diphtheria immunization sessions	194	223
Poliomyelitis vaccination sessions	1,102	1,399
Mothers' Clubs and instructional classes	496	478
Day Nursery medical inspections	58	46
	<hr/> 11,177	<hr/> 11,498

Postgraduate Courses.

One Divisional Nursing Officer attended a week's residential study course arranged by the Queen's Institute of District Nursing for Health Visitors, and seven Health Visitors attended two-week courses at residential school arranged by the Royal College of Nursing and Women Public Health Officers Association in Sheffield and London.

Co-operation with Families Welfare Officer.

For the third year the Families Welfare Officer organized a week's holiday training course for mothers and families. It was felt that it would be helpful to Health Visitors to have close observation of these families at the camp and four Health Visitors, who had recommended families, volunteered to help.

Miss Goad, the Families Welfare Officer, said later that the other workers in the team were very much happier for having the Health Visitors with them as they shared the worry as well as making a real working team.

Later in the year a meeting was held to assess the past and present and to plan the future of the scheme whereby families are taken for rehabilitative holidays. The meeting was attended by several senior officers interested in health and welfare work as well as by those who helped at the camp.

The conclusions reached were :—

- (1) This scheme should continue.
- (2) More suitable accommodation should be found if possible.
- (3) More help should be obtained with the labouring part of transporting equipment, etc.
- (4) The teaching to be more organized.
- (5) More care to be given to the selection of the families. Object of holiday should be explained.
- (6) Holiday should be preceded and followed by supervision.

Mental Health.

During the year two further series of twenty lectures on Mental Health were arranged for Health Visitors at Napsbury Hospital conducted by Dr. A. Torrie, the Consultant Psychiatrist, and Dr. J. H. Patterson, the Hospital's Medical Superintendent. Twenty Health Visitors attended each course.

It is considered that Health Visitors should be able to assist in the prevention of mental illness by early recognition of the signs and symptoms, so that, if necessary, they are able to refer problems to the specialized worker in this field.

The Health Visitors, whilst not encroaching on the duties of Mental Health Workers, are becoming more involved with this branch of health work and last year recorded 1,563 visits to 287 cases of mild mental disorder of mothers and old people.

Discussion Groups.

In the East and Mid-Herts Divisions discussion groups are held regularly with psychiatrists. Dr. Vacher, Consultant Psychiatrist, meets Health Visitors in the Hoddesdon—Cheshunt area fortnightly at the conclusion of her Child Guidance Clinic. This group grew from informal lunch-time conversation between Dr. Vacher and the two Health Visitors at the Health Centre. At this group meeting Health Visitors and the Psychiatrist are able to talk over problems of children and parents who are known to both.

In Welwyn Garden City, following the entry into Gooseacre Health Centre of Medical Staff from Hill End Hospital for out-patient diagnostic and consultative sessions, it was arranged that Dr. Bearcroft, Psychiatrist, would hold group discussions with the Health Visitors and other Social Workers in the area at two-weekly intervals. The purpose of the meetings is to obtain expert advice and assistance in particular cases and also for general guidance in the handling and approach to problems for the benefit of all.

SECTION 25.—HOME NURSING.

At the end of the year 179 nurses were employed on home nursing duties, representing an equivalent of 109·5 whole-time staff.

Number of Staff Engaged.

	1959.	1958.
Whole-time staff engaged solely on home nursing	29	28
Part-time staff engaged solely on home nursing	32	30
Home nursing and midwifery	83	72
Home nursing midwifery, health visiting and school nursing	35	38
	<u>179</u>	<u>168</u>

District Training.

During 1959 eighteen students completed a Queen's Nurse district training course under a Hertfordshire Scholarship. Fifteen trained at the Watford Home and three at various London Training Homes. Twenty-seven Queen's Nurse trainees (fourteen from other Queen's Training Homes) were placed with Nurses in rural areas in Hertfordshire for three days' experience of work in country districts.

TABLE No. 20.

HOME NURSING.

	1955	1956	1957	1958	1959
Total cases	17,671	17,255	15,497	14,960	14,032
Total visits	307,441	292,788	296,691	283,514	270,404
Analysis of visits (per cent to total)—	%	%	%	%	%
Medical	79·0	81·1	81·1	80·5	80·6
Surgical	15·5	14·0	13·29	14·4	15·4
Infectious disease	0·1	0·2	0·1	0·13	0·17
Tuberculosis	4·3	3·6	4·4	3·8	3·0
Maternal complications	0·1	0·3	0·3	0·27	0·25
Others	1·0	0·8	0·9	0·9	0·57
Visits to patients over 65 years of age	59·0	60·9	61·9	60·9	64·4
Visits to patients under 5 years of age	1·4	1·4	1·1	1·2	1·3

TABLE No. 21.

TYPE OF CASES AND VISITS PAID BY HOME NURSES.

	1959							1958
	Medical	Surgical	Infec- tious Diseases	Tuber- culosis	Maternal compli- cations	Others	Totals	Totals
Cases .	10,144	2,428	36	409	106	909	14,032	14,960
Visits .	217,898	41,706	447	8,120	681	1,552	270,404	283,514

There is very little difference in the statistics for home nursing during the past few years. It is noticeable, though, that in the number of Tuberculosis patients seen there has been since 1957 a decline of approximately forty cases and 2,000 visits a year, from 490 cases and 12,894 visits.

THE MARIE CURIE MEMORIAL FOUNDATION.

The Foundation's Area Welfare Grants Scheme, administered by the County Nursing Officer, to provide necessities and extra comforts for cancer cases, helped three patients in 1959. Bed linen, disinfectant, and extra nourishment was provided at a cost of £14 17s. 11d. Although all district nurses are aware of this scheme in three cases only help was sought, a very small proportion of the 1,373 deaths from cancer during the year.

Since the scheme's inception in July, 1957, a total of £36 8s. 7d. has been spent on seven patients.

The grant must not be used in cases where help can be obtained from statutory or other voluntary sources, except as a limited temporary measure.

SECTION 26.—VACCINATION AND IMMUNIZATION.

	At Clinics	By Private Doctors	Total
<i>Smallpox Vaccinations—</i>			
Primary	4,690	5,591	10,281
Re-vacs.	8	1,091	1,099
	4,698	6,682	11,380
<i>Diphtheria Immunizations—</i>			
Primary	5,431	894	6,325
Boosters	4,740	860	5,600
	10,171	1,754	11,925
<i>Whooping Cough Immunizations—</i>			
Primary	4,212	504	4,716
Boosters	236	166	402
	4,448	670	5,118
<i>Combined Diphtheria/Whooping Cough/Tetanus Immunizations—</i>			
Primary	40	5,242	5,282
Boosters	4	1,093	1,097
	44	6,335	6,379

The above Table shows the number of persons who were immunized against whooping cough and diphtheria and vaccinated against smallpox in 1959. In accordance with the Ministry's request the ban on the use of combined vaccine was continued during the year but there were 6,379 children given triple injections by general practitioners.

POLIOMYELITIS VACCINATION.

The following Table shows the number vaccinated against poliomyelitis by the end of 1959.

TABLE 22.

Polio myelitis vaccination Two injections given	Divisions. May, 1956, to 31st December, 1959							County Total at 31.12.1959	County Total at 31.12.1958
	Dacorum	East	South	North	St. Albans	S.-West	Welwyn		
Children born in the years 1943-1958 .	21,858	27,166	12,597	26,657	30,599	36,781	18,361	174,019	121,099
Young persons born in the years 1933-1942	5,177	7,363	3,234	6,884	5,779	10,680	6,882	45,999	1,508
Expectant mothers	2,073	1,834	710	1,091	1,139	1,992	1,019	9,858	4,034
G.P.'s and their families	55	91	61	31	71	149	46	504	426
Ambulance staff and their families . .	10	57	23	70	21	16	22	219	178
Hospital staff and their families . . .	1	226	29	—	180	262	20	718	86
Total	29,174	36,737	16,654	34,733	37,789	49,880	26,350	231,317	127,331
Number of persons given three injections (all groups), September, 1958-31st December, 1959	20,034	24,952	11,251	21,121	21,557	30,546	14,819	144,280	18,154
Number of persons given one injection (all groups) at 31st December, 1959 . . .	165	492	210	131	276	681	184	2,139	3,942

The above figures do not show all vaccinations done at hospitals as they draw bulk supplies of vaccine for their own staff and families, but they have the option of attending through the County scheme at Clinics or general practitioners' surgeries.

DIPHTHERIA IMMUNIZATION.

Year.	Number of Children who completed a Full Course of Primary Immunization.		Number given a Reinforcing Injection.
	Under 5 years of age.	Over 5 years of age.	
1950 . .	6,319	1,037	6,610
1951 . .	7,527	1,015	8,102
1952 . .	6,796	856	8,402
1953 . .	6,560	945	8,117
1954 . .	8,835	901	8,093
1955 . .	6,781	815	5,671
1956 . .	10,768	846	7,338
1957 . .	9,646	661	5,548
1958 . .	10,383	631	6,254
1959 . .	11,106	501	6,697

TABLE 23.

SMALLPOX VACCINATIONS.

Year	Vaccinations			No. of Live births during year	Vaccinations under one year of age	Percentage vaccinated under one year of age
	Primary	Revaccinations	Total			
1950	4,562	1,128	6,299	9,085	3,434	37·8
1951	5,728	3,004	8,732	9,225	3,924	42·5
1952	5,204	1,772	6,976	9,341	3,979	42·6
1953	5,275	1,323	6,598	9,811	4,330	44·2
1954	5,992	855	6,847	10,424	4,827	46·3
1955	6,103	825	6,928	10,874	5,163	47·5
1956	7,371	1,023	8,394	11,792	6,316	53·6
1957	9,558	1,760	11,318	12,538	7,284	58·1
1958	9,781	1,116	10,897	13,618	8,492	62·4
1959	10,281	1,098	11,379	13,850	8,914	64·4

A proportion of the children vaccinated in 1959 were born in 1958. Similarly some of those born in 1959 were not vaccinated until 1960. The last column in Table 23 has, however, been calculated from the same data for the past ten years and the steady improvements should be a true reflection of the number of children who are vaccinated in infancy.

POLIOMYELITIS VACCINATION.

In my last annual report I said that 1958 had been a very successful year. I think that 1959 can truly be called a year of consolidation.

During 1959, 103,986 children and adults were given the initial vaccination of two injections, representing an increase of 82 per cent on the number vaccinated at 31st December, 1958. In addition, 126,126 were given the third injection during the year.

General practitioners vaccinated a little over one-third of the total number ; the others were vaccinated at sessions arranged by the Health Department in Welfare Centres, Schools, and Factories. " Open " sessions, held on Saturdays and evenings in April, May, and June, following the death from poliomyelitis of a well-known sportsman, were largely responsible for increasing the percentage of the 1933-1942 age group vaccinated in the year from 1·3 per cent to 40 per cent.

It is estimated that 87 per cent of the population born in the years 1943-1958 had been given at least two injections between May, 1956, and the end of 1959.

TABLE 24.
POLIOMYELITIS—CASES AND DEATHS.

Year	Population	Confirmed cases		Deaths
		Number	Rate per 1,000 population	
1947 . .	570,719	118	0·21	14*
1948 . .	587,800	23	0·05	5*
1949 . .	596,010	116	0·19	19*
1950 . .	606,640	77	0·13	10
1951 . .	618,700	19	0·03	—
1952 . .	633,700	74	0·12	4
1953 . .	651,500	57	0·09	5
1954 . .	671,700	25	0·04	4
1955 . .	692,000	130	0·19	4
1956 . .	715,000	42	0·06	1
1957 . .	739,800	149	0·20	10
1958 . .	761,200	20	0·03	—
1959 . .	784,000	23	0·03	3

* For the years 1947–49 the number comprises deaths from Poliomyelitis and Polio-Encephalitis.

SECTION 27.—AMBULANCE SERVICE.

There has been a further increase in the demands on the Ambulance Service as compared with last year. Allowance should be made, however, for the fact that approximately 7,000 of the removal cases included in the figures for 1958 were conveyed as a result of the abnormal demands made on the Service during the period of the bus strike in that year. The effective increase for 1959 is therefore in the region of 9,000 patients. It is considered that this increase, principally removals, is due to the progressive rise in the County's population.

There has been a notable decrease in the number of infectious removals carried out by isolation ambulances. This is partly due to the fact that an appreciable amount of this work in the Hertford area, including the weekly Chest Clinic run, has been carried out by general service ambulances during the long period when the East Herts Hospital were without a driver for the isolation ambulance. In addition the Hertford Group Hospital Management Committee gave notice in November that as from 1st December, 1959, the admittance of infectious cases to the East Herts Hospital would be temporarily discontinued and that such cases were in future to be conveyed to Honey Lane Hospital, Waltham Abbey, Essex. The Hertford Chest Clinic will, however, continue to function at East Herts Hospital and for operational reasons the regular conveyance of patients to and from this clinic will be undertaken by vehicles from the local ambulance station. Because of the change in circumstances the isolation ambulance located at East Herts Hospital has been withdrawn and placed into general service.

The graph on page 38 shows the trend in the demands on the Service during the past five years.

There has been a slight decrease in the total number of emergency cases. Of these, accident cases have increased whilst sudden illness cases have remained constant and maternity cases have decreased (see Table 25). Details of the patients conveyed each month during 1958 and 1959 are shown in Table 26.

TABLE 25.

	1948 6 mths.	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Accidents .	1,273	3,177	3,560	3,960	4,236	4,574	4,855	5,448	5,659	6,232	6,760	6,988
Sudden illness .	1,398	3,298	2,971	2,584	2,387	1,930	1,659	1,766	1,795	2,150	1,915	1,916
Maternity .	1,639	3,650	3,547	3,691	3,784	3,654	3,788	3,915	3,820	4,029	3,893	3,567
Totals .	4,310	10,125	10,078	10,235	10,407	10,158	10,302	11,129	11,274	12,411	12,568	12,471

TABLE 26.

DETAILS OF PATIENTS CONVEYED EACH MONTH.

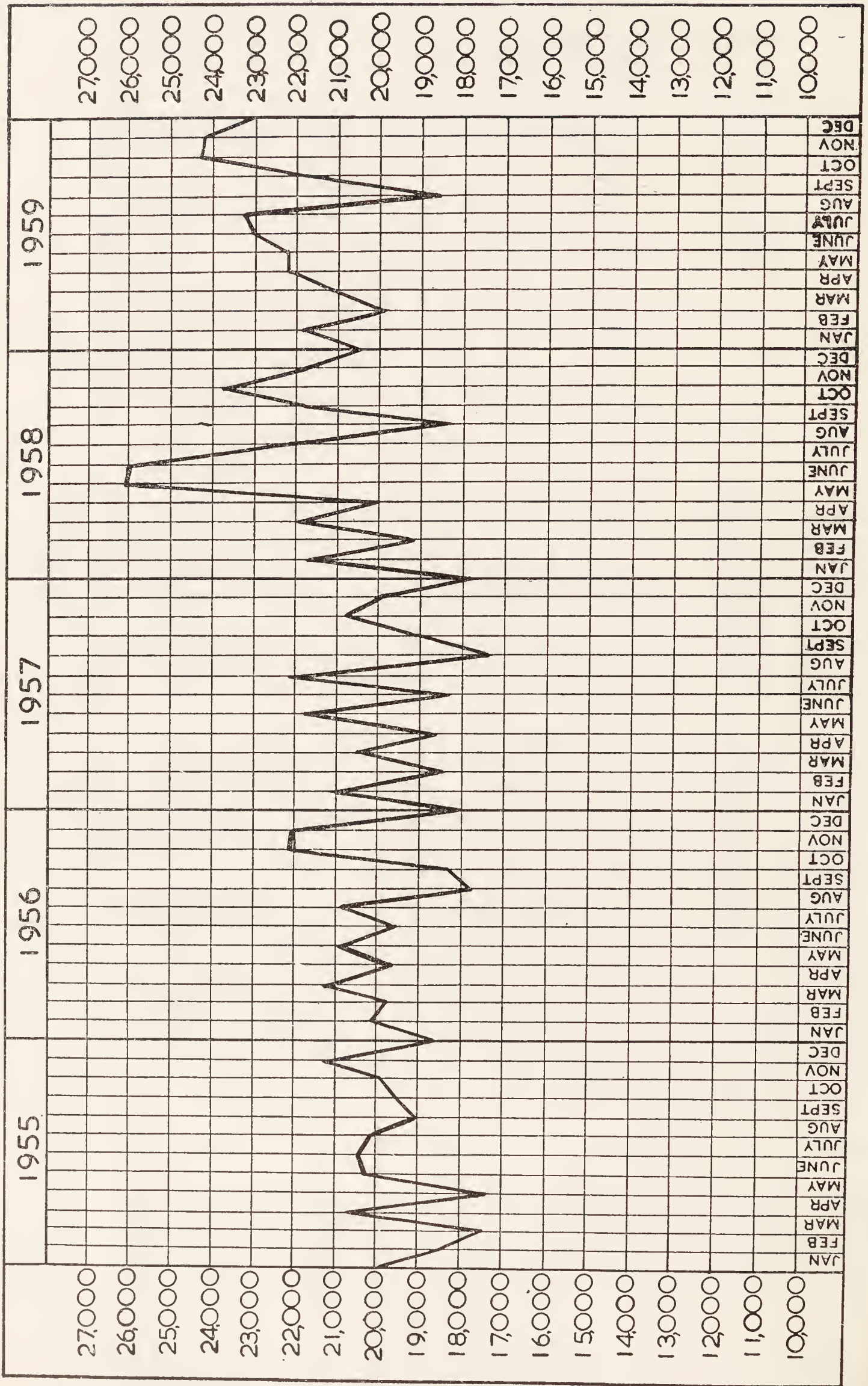
1958.

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Accidents . . .	434	408	473	510	668	635	595	659	552	596	585	645	6,760
Sudden Illness . . .	167	158	166	149	149	176	168	162	151	153	157	159	1,915
Maternity Removals . . .	365	325	363	368	325	312	322	298	299	311	294	311	3,893
Removals . . .	18,479	16,637	18,866	17,268	22,597	22,307	19,236	15,551	19,050	20,896	19,074	17,822	227,783
Hospital Car Service . . .	2,013	1,699	1,920	1,572	2,155	2,402	1,785	1,446	1,527	1,618	1,672	1,496	21,305
Isolation Hospital (Removals) . . .	254	156	194	203	158	162	243	190	177	195	178	119	2,229
Totals . . .	21,712	19,383	21,982	20,070	26,052	25,994	22,349	18,306	21,756	23,769	21,960	20,552	263,885

1959.

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Accidents . . .	587	414	452	521	620	610	679	651	610	638	582	624	6,988
Sudden Illness . . .	164	150	141	169	159	174	189	163	155	167	133	152	1,916
Maternity Removals . . .	362	282	331	313	280	290	320	278	261	294	260	296	3,567
Removals . . .	18,753	17,192	17,775	19,082	19,065	19,500	19,711	15,688	18,648	20,922	20,977	19,972	227,285
Hospital Car Service . . .	1,786	1,783	2,209	2,073	2,033	2,423	2,402	1,915	2,195	2,238	2,287	2,011	25,355
Isolation Hospital (Removals) . . .	192	153	133	17	27	34	28	18	19	18	20	23	682
Totals . . .	21,844	19,974	21,041	22,175	22,184	23,031	23,329	18,713	21,888	24,277	24,259	23,078	265,793

AMBULANCE CALLS SINCE 1955.



During 1958 the number of patients carried by the directly provided service showed an increase of 12·06 per cent over the previous year, with an increase in mileage of 7·88 per cent. In 1959 the number of patients carried shows a decrease of 0·25 per cent with a decrease in mileage of 2·20 per cent.

The following table shows the number of patients carried and the mileage involved in respect of the directly provided service, Hospital Car Service, and the isolation ambulances for the years 1958 and 1959.

TABLE 27.

	1958	1959	Increase or Decrease	
<i>Patients.</i>				
Directly Provided Service . . .	240,351	239,756	Decrease	595
Hospital Car Service . . .	21,305	25,355	Increase	4,050
Isolation Ambulances . . .	2,229	682	Decrease	1,547
<i>Mileage.</i>				
Directly Provided Service . . .	1,526,912	1,493,382	Decrease	33,530
Hospital Car Service . . .	353,371	446,723	Increase	93,352
Isolation Ambulances . . .	5,008	2,596	Decrease	2,412

The directly provided service shows a reduction in the average number of miles per patient from 6·35 to 6·23, and an increase in the average number of patients per journey from 3·59 to 3·68.

As will be seen in Table 27, there has been an increase in the number of patients conveyed by the Hospital Car Service and this is due to the increasing demands on the Service which has necessitated the passing of additional work to the voluntary car drivers.

SECTION 28.—PREVENTION OF ILLNESS, CARE, AND AFTER-CARE.

In previous reports reference has been made to the wide field of work possible under this Section. This field will be further increased in the years to come as the provisions of Section 6 of the Mental Health Act with its reference to Section 28 will, when that Act comes into operation, extend the duties laid on Local Health Authorities very considerably. Care and After-Care has always included the mentally defective in the community, but for convenience reference to this group has hitherto in the Annual Reports been made compositely with Section 51.

It will continue so in this Report for 1959, leaving the bulk of the work commented on under this Section to that connected with the Tuberculous.

Tuberculosis.

The total number of cases notified in the County during the year was 400 (367 pulmonary cases and 33 non-pulmonary). Table 31 shows how numbers have fallen during the three years from 1957 and the figure of 400 is the lowest recorded in Hertfordshire notwithstanding the tendency during recent years to treat and thus notify many cases of primary tuberculosis which in the past were often kept under observation and were not given specific treatment or notified.

Table 30 shows the notifications in relation to the districts in the County and also the number of cases which, with the ever increasing population, come into Hertfordshire. Letchworth with its special training centre continued to receive a large number; and the new towns of Stevenage, Hatfield, and Hemel Hempstead, in spite of their selected working population also had a high proportion of "transfers in".

The Chest Physicians have given reports on the general work of their separate clinics. The Physician in West Herts referred to the need to have Social Workers in Hemel Hempstead and it is hoped that during 1960 it may be possible to meet his request at least to some extent.

Trained Almoners are not easily obtained at the present time but the members of the County Council's staff who have been acting as unqualified Almoners at the Chest Clinics for the past year or two have met the demands placed upon them very successfully. The one at Barnet who is also a trained nurse works both at the Clinic and in the patient's homes while the two at Watford and St. Albans work within the Clinic obtaining their information about the homes from the tuberculosis visitors. Reports from these three Social Workers are included. The figures in only one report have been included as the others follow similar lines.

TABLE 28.—TUBERCULOSIS (RESPIRATORY)—DEATH RATE, 1930–1959.

Per 1,000 Population.

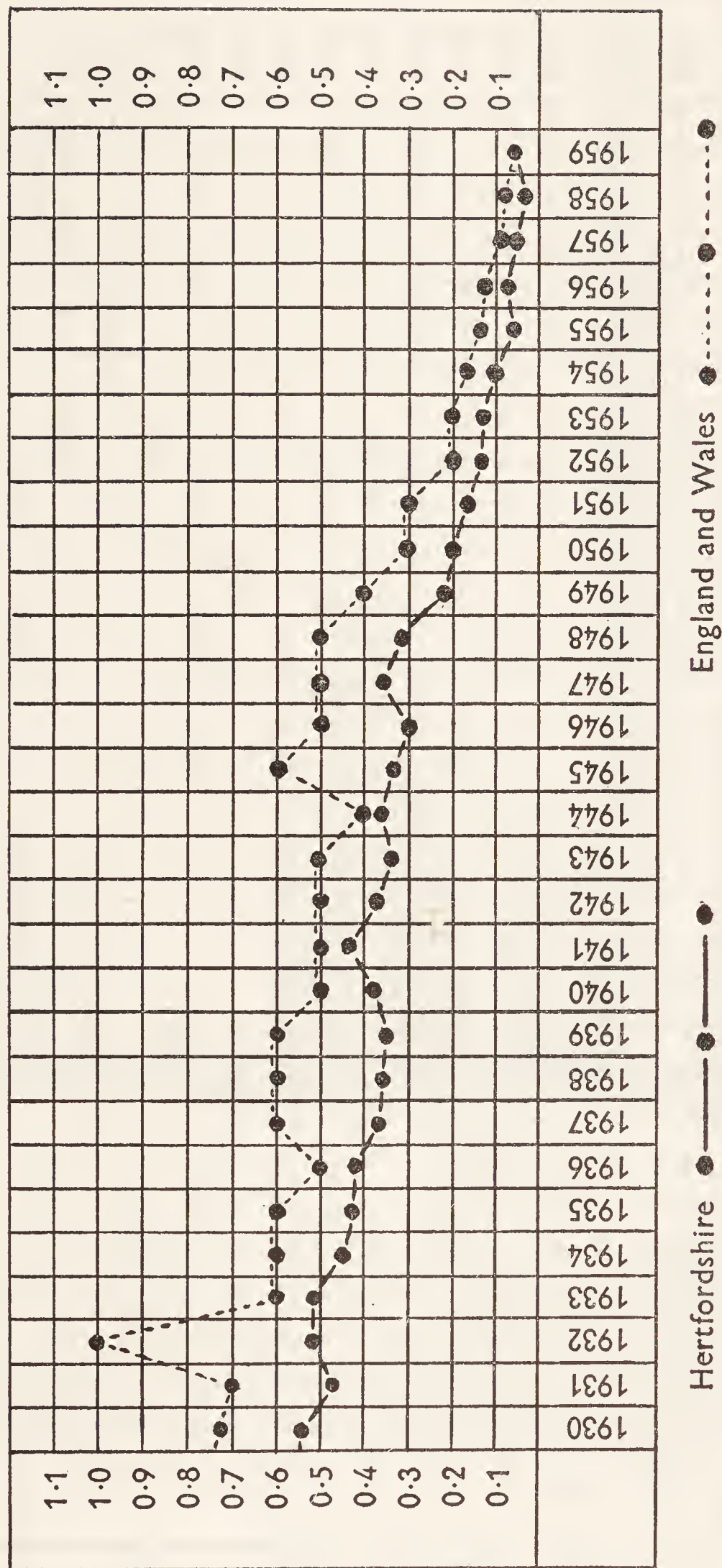
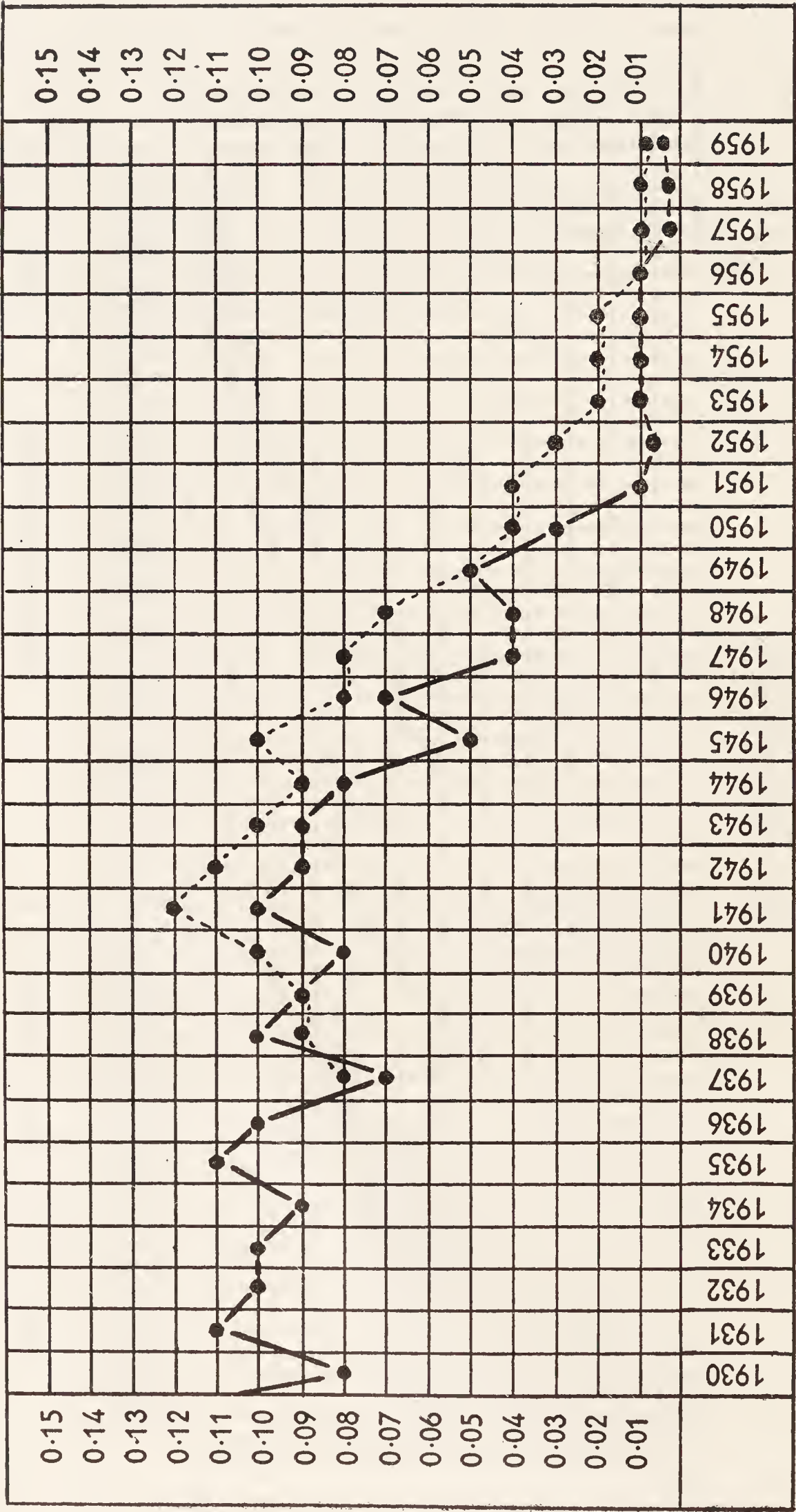


TABLE 29.—TUBERCULOSIS (OTHER THAN RESPIRATORY)—DEATH RATE, 1930-1959.
Per 1,000 Population.



Hertfordshire ●————● England and Wales ●-----●

TABLE 30. TUBERCULOSIS 1959.

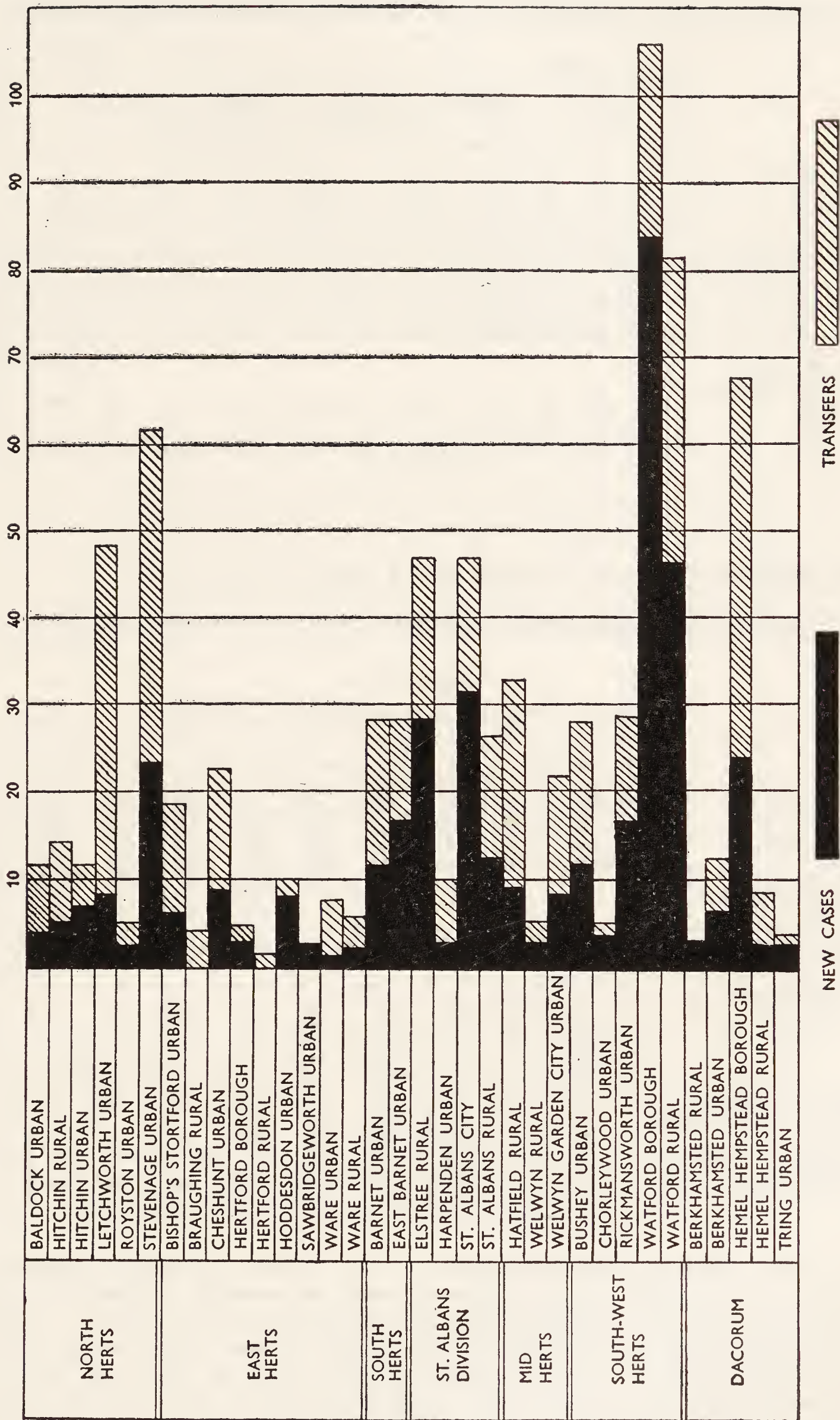


TABLE 31.

NOTIFICATIONS OF PULMONARY AND NON-PULMONARY TUBERCULOSIS.

	1957				1958				1959			
	No. of cases notified			Attack rate per 1,000	No. of cases notified			Attack rate per 1,000	No. of cases notified			Attack rate per 1,000
	M	F	Total		M	F	Total		M	F	Total	
<i>Pulmonary.</i>												
Urban . . .	214	130	344	0·67	202	127	329	0·62	166	97	263	0·6
Rural . . .	91	73	164	0·73	82	43	125	0·54	66	38	104	0·44
County . . .	305	203	508	0·69	284	170	454	0·6	232	135	367	0·47
<i>Non-Pulmonary.</i>												
Urban . . .	18	33	51	0·1	17	26	43	0·08	9	17	26	0·05
Rural . . .	7	12	19	0·08	7	8	15	0·07	2	5	7	0·03
County . . .	25	45	70	0·09	24	34	58	0·08	11	22	33	0·04
<i>Pulmonary and Non-Pulmonary.</i>												
Urban . . .	232	163	395	0·77	219	153	372	0·7	175	114	289	0·53
Rural . . .	98	85	183	0·81	89	51	140	0·61	68	43	111	0·47
County . . .	330	248	578	0·78	308	204	512	0·67	243	157	400	0·51

DR. HOUNSLOW, SOUTH DIVISION AND ELSTREE DISTRICT.

Table 32 gives comparative statistics for the ten years 1950–59.

TABLE 32.

GENERAL COMPARATIVE STATISTICS, 1950–59.

	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
New patients (consultations)	672	715	792	844	726	610	623	639	550	441
Old patients . . .	1,736	1,952	2,464	3,170	3,218	3,909	4,256	4,330	4,078	4,193
New contacts . . .	276	206	325	348	353	376	385	294	264	248
Old contacts . . .	397	392	585	898	947	1,261	1,416	1,262	1,143	969
Refills . . .	2,442	4,785	7,830	8,813	7,823	6,270	3,827	2,013	684	86
X-rays only . . .	—	—	—	—	3,660	4,520	5,329	5,261	5,193	4,681
New dental patients . . .	—	—	—	—	—	52	76	56	38	15
Old dental patients . . .	—	—	—	—	—	183	336	223	186	236
Total attendances . . .	5,523	8,050	11,996	14,073	16,727	17,181	16,248	14,078	12,136	10,869
New Notifications :										
T.B. minus . . .	53	59	66	46	39	42	45	45	44	36
T.B. plus . . .	40	35	22	38	39	15	33	23	28	28
Total . . .	93	94	88	84	78	57	78	68	72	64
Transfers-in (Tuberculosis) . .	34	73	145	126	156	193	112	60	55	63
Patients "Recovered" . . .	15	71	41	11	18	112	83	62	76	97
Deaths (all causes) Register patients . . .	22	16	12	16	23	15	23	19	17	23
Register at 31st December . .	734	699	846	962	1,089	1,144	1,151	1,131	1,087	1,014
Patients with positive sputum last six months . . .	46	62	70	51	48	29	43	41	20	20

The general trends noted in the past two or three years have continued, with an overall decline in the volume of work not entirely attributable to the virtual cessation of pneumothorax and pneumoperitoneum refills. Smaller attendances in the latter months of the year may to some extent be linked with the unusually fine and prolonged summer. It would be unwise to predict a continued decline, and attendances would seem likely to be maintained at the present level for some time to come. It is gratifying to note that the patients excreting tubercle bacilli in the latter half of the year continue at a low level, but against this must be set the fact that many of these are chronic excretors of drug-resistant organisms.

New Tuberculosis Notifications.

Sixty-four newly notified patients were added to the register. These may be analysed as follows :—

	1959.	1958.
In-patients, Shenley Mental Hospital .	13	5
Relapsed " recovered " cases . . .	5	5
Follow-up of known lesions . . .	10	7
" New " cases	36	55

The figures are somewhat inflated by a small " epidemic " of primary infections at a Primary School where a teacher was discovered to have open pulmonary tuberculosis. There would appear, therefore, to be a real diminution in the incidence of new tuberculosis in the area, although it is disappointing that so many " recovered " and previously non-notified lesions relapsed under supervision.

TABLE 33.
NEW NOTIFICATIONS, 1959, AGE AND SEX DISTRIBUTION.

Age Groups (Years)	Respiratory		Non- respiratory		All Forms		Total	Totals Previous Years		
	M	F	M	F	M	F	1959	1958	1957	1956
0-4	—	—	1	—	1	—	1	1	—	—
5-9	3	4	—	—	3	4	7	4	5	1
10-14	1	1	—	—	1	1	2	1	1	—
15-19	4	—	—	—	4	—	4	4	3	7
20-24	3	3	—	—	3	3	6	8	6	6
25-29	3	1	—	—	3	1	4	4	4	4
30-34	4	2	—	—	4	2	6	8	13	13
35-39	2	5	—	1	2	6	8	8	7	9
40-44	5	—	—	—	5	—	5	11	5	6
45-49	2	1	—	—	2	1	3	5	6	6
50-54	—	1	—	—	—	1	1	7	8	10
55-59	5	—	—	—	5	—	5	3	5	—
60-64	4	—	—	—	4	—	4	1	3	6
65 +	7	1	—	—	7	1	8	7	2	10
	43	19	1	1	44	20	64	72	68	78

TABLE 34.

EXAMINATION OF 463 SECONDARY SCHOOL CHILDREN IN CONTACT WITH
A FELLOW-PUPIL WITH ACTIVE PULMONARY TUBERCULOSIS.

Tuberculin Testing				Positive Reactors					B.C.G.
Pos.	Neg.	Abs.	Total	X-ray Normal	Post- B.C.G.	Already known to Clinic	Absent for X-ray	Total	
115	343	5	463	24	72	4	15	115	66

The survey coincided with the thirteen year-old B.C.G. scheme. The sixty-six negative reactors in this age-group were therefore vaccinated.

B.C.G. Vaccination.

Seven hundred and ninety-eight persons were vaccinated, as follows :—

(a) Herts C.C. Approved Arrangements.

Contact Scheme (Circular 72/49)	192*
School Children Scheme (Circulars 22/53 and 7/59)	498
Older School Children Scheme (Circular 7/59)	40
Further Education Students (Circular 7/59)	1
	<hr/> 731 <hr/>

* Including sixty-six schoolchildren referred to in Table 34.

(b) Regional Hospital Board's Approved Arrangements.

Hospital nurses	8
Other hospital staff	2
Hospital in-patients (newly-born infants)	57
	<hr/> 67 <hr/>

B.C.G. in Schools Scheme.

The overall results are summarized in Table 35.

TABLE 35.
B.C.G. IN SCHOOLS SCHEME (THIRTEEN YEAR-OLDS).

Tuberculin Testing						B.C.G. Vaccination					
Pos.	Neg.	Refused	Absent	Others	Total	Vacc.	Absent	Refused	Prev. BCG	Others	Total
26 5%	499 95%	25	2	15	567	498	0	0	0	1	499

TABLE 36.

EXAMINATION OF FIFTY-THREE POSITIVE REACTORS (INCLUDING TWENTY-THREE TESTED ELSEWHERE PLUS FOUR IN OLDER AGE GROUP).

Already known to Clinic	5
X-ray normal	46
Calcified lesions	2
	<hr/> 53 <hr/>

TABLE 37.

DIAGNOSIS OF NEW PATIENTS REFERRED TO CLINIC
(EXCLUDING CONTACTS).

Diagnosis	1959	1958	1957
Active pulmonary tuberculosis	18	25	41
Inactive pulmonary tuberculosis	25	35	36
Non-respiratory tuberculosis	2	1	7
" Transfers-in " (tuberculosis)	58	55	85
Staff etc. for B.C.G.	24	65	43
Total tuberculosis work	127 (29%)	181 (33%)	212 (33%)
Bronchitis, asthma, emphysema	103	108	127
Pneumonia, etc.	56	51	75
Carcinoma and other growths	26	23	23
Other pulmonary conditions.	22	40	36
Cardio-vascular disorders	13	10	12
Other conditions	34	31	34
N.A.D. etc.	60	106	120
Total non-tuberculous work	314 (71%)	369 (67%)	427 (67%)
Total new attendances	441	550	639

DR. WATKIN-EDWARDS, ST. ALBANS AND MID-HERTS DIVISIONS.

There has been a substantial fall in the number of new notified cases of pulmonary tuberculosis in 1959—fifty-nine as compared with ninety-four in 1958. The M.M.R. Unit did not operate extensively in this clinic area in 1959 and this may explain, at least in part, the fall in notifications.

The table shows the source of these cases and their initial sputum state.

Source	Direct Pos.	Cult. Pos.	L.S. Pos.	Neg.	N/e.	Total
G.P.	5	3	—	2	—	10
Routine and M.M.R.	2	1	—	5	—	8
Contacts (new)	1	—	—	1	3	5
Other departments of hospital	1	3	—	2	—	6
Min. X-ray service.	4	4	1	3	—	12
M.M.R. follow-up	1	—	3	1	—	5
Contact follow-up	—	—	—	4	1	5
Other follow-up	2	3	1	2	—	8

Forty of the new cases were males and nineteen females. Eighteen of the men and five of the women were over forty years of age.

All the cases under fourteen years of age (six in all) were contacts of recently diagnosed sputum positive cases, and five of twelve patients aged fifteen to twenty-four had a contact history. This suggests that chance infection from an unknown source is becoming uncommon and emphasizes the importance of examining all possible contacts of infectious patients.

Attendances.

New patients (consultation)	1,049
Old patient attendances	6,248
Refills	23
" X-ray only "	3,238
New contacts	340
Old contacts	769
Number of contacts given B.C.G.	213
	<hr/> 11,880 <hr/>

DR. P. W. ROE, SOUTH-WEST HERTS AND DACORUM DIVISIONS.

The Tuberculosis Register continues to increase but for the first time this increase is noticeably less than in previous years. At the same time the Regional Hospital Board has allowed an increase in Medical Sessions sufficient to allow all patients to be seen without undue strain on the staff concerned. The appointment of a Superintendent Radiographer has relieved the situation so far as radiography is concerned and the administrative staff are also relieved of the responsibility of trying to fit the X-ray work into a reduced number of sessions necessitated by the shortage of radiographers.

The work of the Tuberculosis Visitors continues to develop, and at present there is a post vacant. Applications for these vacancies are not large enough to enable sufficiently experienced people to be appointed in every case, so that the first year is spent gaining experience in many cases. The visitors have now taken over full responsibility for all cases of pulmonary tuberculosis, including those not on the Tuberculosis Register, and the contacts of these people are now offered full protection by means of B.C.G. vaccination. In addition B.C.G. vaccination is offered to all contacts up to the age of thirty years, so that a very full protection against tuberculosis is now available in West Herts.

The last Almoner who undertook the medical social work of the Chest Clinic Service left in June and was not replaced. It is understood that no replacement is contemplated at present. For the second half of the year the

Almoner's clerk in Watford undertook many duties of a medical social nature in order to maintain some service for out-patients in South-West Herts. I think everyone concerned is very grateful to Mrs. Beavan for taking over these duties and managing extremely well in difficult circumstances, and I feel sure that the patients concerned will be particularly anxious to associate themselves with these remarks. Unfortunately the very heavy extra duties began to affect her health and we then applied for temporary clerical help for the Almoner's clerk, and this was granted. The new clerk is now in post. The Tuberculosis Visitors have also taken on extra duties to help more with the social side. The hospital Almoners in Watford have been unable to give appreciable assistance in this emergency.

At Hemel Hempstead the medical social work has virtually collapsed since June. The Tuberculosis Visitors have been doing their best for tuberculosis patients and the hospital Almoners have been able to help a little with the non-tuberculous cases.

A statistical review of the work during the last three years is given below :—

	Watford			Hemel Hempstead		
	1957	1958	1959	1957	1958	1959
New consultations . . .	667	631	792	387	290	334
Old consultations . . .	6,606	7,067	7,477	2,131	2,678	2,646
New contacts . . .	864	825	887	457	437	308
Old contacts . . .	2,272	2,569	2,852	872	1,011	1,150
Refills . . .	567	51	27	106	28	2
X-Ray only . . .	3,559	3,329	3,257	—	—	—
	14,535	14,472	15,292	3,953	4,444	4,440
New notifications :						
T.B. + . . .	54	57	73	17	9	11
T.B. — . . .	112	94	69	43	41	21
Non-respiratory . . .	10	19	11	15	4	6
Transfers into area . . .	186	89	97	72	71	59
Deaths . . .	25	20	16	6	3	10
Recovered . . .	75	43	29	27	25	15
Number of patients on Register at 31st December . . .	1,781	1,867	1,936	647	700	732
B.C.G. :						
Number of contacts skin tested . . .	1,387	1,540	1,969	532	794	949
Number found negative . . .	502	580	650	320	340	290
Number of B.C.G. vaccinations	245	312	353	107	134	134

DR. MACDONALD, NORTH HERTS DIVISION.

The number of tuberculous cases on the Register is now 655 compared with 692 in 1958. Total attendances for the year were 126 more than in 1958. Attendances for miniature radiography showed an increase of 183 ; attendances for refills totalled only thirteen.

	<i>Total</i> <i>Attendances.</i>	<i>Miniature</i> <i>Radiography.</i>
1958 . . .	9,638	1,621
1959 . . .	9,764	1,804

Newly notified cases of pulmonary tuberculosis during 1959 totalled forty, twenty-three less than in 1958, and these were referred to the Clinic from the following sources :—

General practitioners . . .	10
Mass radiography unit . . .	9
Odelca recalls . . .	7
Contacts (new) . . .	4
Contacts (old) . . .	1
Other departments and hospitals . . .	7
Other sources . . .	2

Attendances throughout the year were as follows :—

New patients	.	.	.	1,273
Old patients	.	.	.	5,433
Transfers in	.	.	.	108
X-ray only	.	.	.	1,804
New contacts	.	.	.	316
Old contacts	.	.	.	817
Refills	.	.	.	13

One hundred and fourteen school children were referred to the Clinic for X-ray following positive skin tests prior to B.C.G. vaccination. Seven of these were recalled for large films but no significant lesions were found.

Thirty-five cases of bronchial carcinoma were diagnosed during the year showing an increase of 50 per cent on 1958 figures. This increase is by far the most serious aspect of chest disease at the present time.

DR. NEVILLE, EAST HERTS DIVISION.

The total number of cases added to the Register shows a slight decline, but there is no really significant difference as compared with previous years. The number of patients seen at the Clinics continues to rise and it has been found necessary to increase the number of out-patient clinics at the Hertford Chest Clinic from two up to three sessions a week.

(1) New cases of Pulmonary Tuberculosis added to Register during 1959.

(a) From G.P.s	.	.	.	20
(b) Routine examination	.	.	.	1
(c) Contact examination	.	.	.	3
(d) Suspects	.	.	.	—
(e) Transfers in	.	.	.	49
(f) Hospitals	.	.	.	6
(g) Mass radiography	.	.	.	2
				—
				81
				—

(2) New cases of Non-respiratory Tuberculosis added to Register during 1959.

(a) From G.P.'s	.	.	.	—
(b) Routine examination	.	.	.	—
(c) Contact examination	.	.	.	1
(d) Suspects	.	.	.	—
(e) Transfers in	.	.	.	3
(f) Hospitals	.	.	.	3
(g) Mass radiography	.	.	.	—
				—
				7
				—

(3) Number of Home Contacts involved in above new cases	.	134
(4) Number of Contacts called for examination	.	207
(5) Numbers of these seen	.	200
(6) Number skin tested (Positive)	.	50
(7) Number skin tested (Negative)	.	60
(8) Number X-rayed.	.	199
(9) Number of these found to have tuberculosis	.	2
(10) Number kept under observation	.	190
(11) Number given B.C.G.	.	55
(12) Total of all B.C.G. vaccinations during the year	.	159

ALMONERS AND SOCIAL WORKERS.

South-West Division.

Following the Almoner's resignation in June, 1959, it was found to be impossible for the Almoner's Department at the Watford Chest Clinic to cover

the needs of patients in the Dacorum Division and the chest patients in the Watford Hospitals.

The amount of work done in Watford Chest Clinic itself remains the same as in previous years. Four hundred and fifty-eight patients were referred to the Almoner's Department by the Chest Physicians, Health Visitors, and others. Fifty-four of these were Hemel Hempstead patients during the period January to June. All these patients received help varying from financial aid to a sympathetic ear. The importance of this latter help should not be overlooked, as often in cases where no specific help is possible or needed, it is, nevertheless, an enormous help to patients to be able to unburden themselves to someone who can, perhaps, assist them in sorting out their problems in their own minds, be it a domestic problem or the need to adjust themselves to the necessity of treatment.

Housing continues to be a major problem although this is, perhaps, no more acute for Chest Clinic patients than other sections of the public. However, with some tuberculous patients there are certain circumstances which should be considered and it is hoped that the liaison between the Chest Clinic and the various Medical Officers of Health and Councils has helped in the assessment of the true needs of many cases.

Eighty-one patients fit to return to employment have been seen in the Almoner's Department. Fifty of these were referred to the Disablement Resettlement Officer who, as always, has done splendid work in helping to place patients in suitable employment and in arranging Government Training Courses in a few cases. Twenty-eight patients returned to their old jobs or got work through their own efforts, and three patients relapsed during the year. There remains a hard core of patients for whom, over the last year or two, it has not been possible to find work owing to their inability, as a result of their chest conditions, to keep up with the normal industrial tempo. The possibility of a sheltered workshop in the Watford area is good news indeed for this type of patient.

As well as the help given to patients by the statutory bodies, various voluntary societies have been most generous. The Bowley Charity for Deprived Children has given considerable help to some of our families, and the Glasspool Trust and the Friends of the Poor have again given aid where this has been recommended by the Almoner's Department. The Margaret de Sousa Deiro Fund has been instrumental in helping a widow to settle down to a prolonged period of hospital treatment by making her a weekly grant, thus removing most of her financial difficulties—her main source of worry while in hospital. Where the need has been for a war disability pensioner, the Administrative Officer of the Watford British Red Cross has been ever ready with advice and material assistance.

Both the Occupational Therapist employed by the County Council and the British Red Cross Occupational Therapist have kept in close touch with the Almoner's Department and good work is being done by these two persons. The facilities for diversional therapy continue to be a tremendous boon to the tuberculous patients who, even in these days of shortened treatment, still have to face what to them is a long period of inactivity.

A large number of patients have also derived great benefit from the provision of free milk, equipment on loan, and convalescent holidays arranged through the County Health Department, and the Home Help Service has been taken full advantage of, thanks to the close co-operation of the Home Help Organizers. This Service is particularly essential where the patient is a housewife and mother. In this same category of patient, the Children's Officer's help is also invaluable when the patient has to go into hospital for treatment and arrangements must be made for the care of the children. Thanks are also

due to the Tuberculosis Health Visitors who, in addition to their own duties, have done much to fill the gap, especially where there has been the need for home visits in connection with social work.

St. Albans and Mid Herts.

In my report for 1958 I noted that despite a decrease in the size of the area, the number of cases had not grown less. This year, however, there has been a very significant decrease in the number of cases, 186 compared with 263 last year. The statistics cannot be compared unless they are reduced to a percentage basis, and then some interesting results can be seen. The percentage of patients needing advice on personal and emotional problems increased to 84 per cent from 47 per cent in 1958 and 24 per cent in 1956. It is difficult to give any particular reason why this should be so. Cases during the past year have been more complex, and unsettled homes, care of children, social ostracism owing to a misunderstanding of the disease by the healthy, and financial worry have been only some of the problems.

Last year I could comment on a decrease in the percentage of patients with financial difficulties, and consequently in the demand for home care. This year there has been a remarkable reversal of this trend. Financial difficulties have risen from 28 per cent to 46 per cent, and the need for home care has, on a percentage basis, risen equally. It is obvious from the nature of the cases dealt with that this increase is the direct result of the relaxation of credit facilities. More and more people are mortgaging their future income and are only safe in so doing if they remain in good health. Sickness often brings financial problems of a magnitude which we did not see some years ago. These in turn lead to emotional troubles as well.

Although there has been a decrease in the number of patients referred to the Almoner in this area, there has been the largest amount of "major case-work" that I have yet met.

Many problems could not be solved without the active co-operation of the officers of the National Assistance Board, the Group Disablement Resettlement Officer, and the voluntary organizations. The good work which they do rarely brings them any reward. I am more fortunate because I see the result of a generous gift, or a humane response from a statutory body, in the relief and pleasure in a patient's face. I am greatly indebted to all the many people who have helped me, and I am glad to have this opportunity of paying tribute to their generous and prompt assistance.

Early this year the tuberculosis wards at the St. Albans City Hospital were closed but there are now a few beds in another part of the hospital for short-term non-infectious cases. All patients are interviewed before admission to the wards here, and as a general rule it has not been necessary to visit them again during the two or three weeks they have remained in hospital. Apart from these exceptions, patients are now admitted to Clare Hall. They are interviewed at the Chest Clinic prior to admission where any immediate problems can be sorted out and a report is then sent to the Almoner at Clare Hall. She in turn sends a discharge report to me when the patient is due to leave hospital, which ensures continuity in the care of the patient. The system is satisfactory but it does involve increased administrative work. The weekly conference with the Chest Physician continues, and provides a useful forum for discussing both general and particular aspects of the work. It also serves to emphasize the fact that success or failure depends on co-operation—co-operation of patient, Health Visitor, Almoner, and Physicians.

South Herts Division.

The number of patients referred to the Social Worker during 1959 remains much the same as for the two preceding years but the number of visits to

tuberculosis persons is down and this appears to be due to the fact that more people are continuing at work while receiving chemotherapy and are therefore interviewed at the Chest Clinic rather than in their homes. It has been advantageous for the Almoner to attend evening clinics occasionally and so keep in touch with some of these patients. In certain instances modifications in working conditions, while continuing treatment, are necessary. With the variety of jobs in factory workshops this can usually be arranged and has proved beneficial in numerous cases. Training for completely new work was sometimes necessary and five people were accepted for Ministry of Labour training schemes.

Yet in many cases the home visit by an Almoner is still very valuable. It is impossible to write with any conviction about housing problems unless the home picture is quite clear. Again it is sometimes necessary to see a family together when help is needed with personal difficulties ; and financial need can be better assessed after a home visit when so many things can be observed. Only individual case notes can indicate the benefits derived from constant home visits and sustained effort over several months.

It is difficult to make fresh observations on social work in the field of domiciliary tuberculosis as this work remains basically routine although the period of treatment has often been shortened and the problems of rehabilitation have therefore lessened. Yet relapses are fairly frequent and several war pensioners during 1959 sought the help of the social worker in getting pensions adjusted and allowances awarded. The B.R.C.S. were always ready to give additional help with their resettlement, extra nourishment, and with the provision of occupation therapy.

Nursery Care and Home Help were two services which the Almoner made many demands upon during 1959. Eight families needed constant help from these services throughout the year because of the diagnosis of tuberculosis in young mothers or because extra care was indicated before and after a new birth. Nursery care of the children was undertaken when the mother was receiving hospital treatment and in addition Home Help provided when she returned home. In an area such as Boreham Wood where grandmothers and aunts seem to be in short supply the arranging of such care in a matter of hours gave enormous benefit to the sick person.

Although fifty-two were helped financially during 1959 there was little real need among patients. The increase in the National Assistance rates benefited those with long-term illnesses and with the extra allowance given to the tuberculous patient, who has ceased work because of his illness, the amount of money given appeared to be sufficient for a moderate standard of living. Extra financial aid was granted by the County to eighteen patients in need of a recuperative or convalescent holiday. Help with fares, free milk, and the paying of wireless licences were some of the small needs provided for patients with long illnesses.

In the field of After-Care with the non-tuberculous person it is a great pity that more time cannot be devoted to these courageous people with disabling chronic illnesses. Clinic sessions and the care of the tuberculous takes up most of the time at the Almoner's disposal.

Cases Referred by :—

Chest physicians	76
Hospital—Hertfordshire	6
Ex-Herts	2
General practitioner	7
C.M.O. or D.M.O.	3
Health Visitor	52
Patient	20
Others	14
Visits to T.B.	104
Visits to Non-T.B.	58
Interviews in Clinic	242

NEEDS.

<i>Advice on personal and emotional difficulties</i>	.	.	.	.	.	.	60
<i>Finance</i>	.	.	.	.	.	.	52
<i>Resettlement.</i>							
Rehabilitation	.	.	.	.	.	.	7
Training	.	.	.	.	.	.	8
Employment	.	.	.	.	.	.	28
<i>Housing.</i>							
Rehousing	.	.	.	.	.	.	20
Accommodation	.	.	.	.	.	.	6
<i>Home Care.</i>							
Day Nursery	.	.	.	.	.	.	12
Home Help	.	.	.	.	.	.	24
Diversional Therapy	.	.	.	.	.	.	11
Care of Children	.	.	.	.	.	.	12
Milk grants							
Extra nourishment grants							38
Clothing	.	.	.	.	.	.	12
Fares	.	.	.	.	.	.	14
Books	.	.	.	.	.	.	6
Convalescence	.	.	.	.	.	.	22
Miscellaneous	.	.	.	.	.	.	12

AGENCIES USED IN SOCIAL ACTION.

<i>Statutory.</i>							
Ministry of Labour and National Service	.	.	.	.	.	.	22
National Assistance Board	.	.	.	.	.	.	26
Ministry of Pensions and National Insurance	.	.	.	.	.	.	30
<i>County.</i>							
Children's Committee	.	.	.	.	.	.	12
Health Committee	.	.	.	.	.	.	32
Welfare Committee	.	.	.	.	.	.	2
Probation Committee	.	.	.	.	.	.	2
Education Committee	.	.	.	.	.	.	4
<i>Voluntary.</i>							
British Red Cross Society	.	.	.	.	.	.	22
Women's Voluntary Service	.	.	.	.	.	.	10
Others	.	.	.	.	.	.	22

East Herts.

During the year forty-two new cases where help of various kinds was needed have been recorded, of whom twenty-two came via the East Herts Chest Clinics. Others were referred by Divisional Nursing Officers, Health Visitors, Welfare Department, three by Almoners of London hospitals, and ten from other hospitals.

I continue to visit the Hertford Chest Clinic weekly to consult with Chest Physicians and Health Visitors on any cases in any of their three Clinics where my help is needed, and to interview patients referred to me. Various forms of help in all the above cases were arranged, to include temporary accommodation for married women and infants in housing difficulties after confinement, financial help to provide extra nourishment, extra fuel, and other necessities for Chest Clinic patients suffering from carcinoma, of whom there is an increasing number ; help with fares and holiday expenses in cases not qualifying for official arrangements, and in three cases financial help in domestic difficulties.

In addition to the newly recorded cases already quoted, thirty-nine from previous years, of whom twenty-four are tuberculous patients, are still regarded as current and under supervision.

TUBERCULOSIS VISITORS.

The number of Health Visitors employed full-time at the end of 1959 on tuberculosis work was ten. Their establishment allows for one extra Tuberculosis Visitor in the South-West-Dacorum Divisions. This vacancy

has existed for a considerable time, as there is difficulty in getting staff for this type of specialized work. It was, however, possible to maintain the establishment at four.

The case load in the St. Albans–Welwyn area is high but the staff are coping with the work satisfactorily. In my last report I mentioned that one Visitor, who left in July, 1958, was not replaced as it was considered that, with additional clerical assistance in the Clinic, the need could be met by the use of only one Health Visitor in the area around.

Tuberculosis Visitors' Case Load at 31st December, 1959.

<i>Divisions.</i>	<i>No. of Visitors.</i>	<i>Patients under Supervision.</i>
East Herts	1	408
North Herts	2	1,176
South Herts	2	1,062
South-West and Dacorum . .	4*	2,344
St. Albans and Welwyn . .	1	1,253

* Establishment—5.

TABLE 38.

	1958		1959	
	Attendances at Chest Clinics	Visits to Patients	Attendances at Chest Clinics	Visits to Patients
Tuberculosis Visitors . . .	1,848	22,833	1,959	22,716
Health Visitors	2	599	5	211
Home Nurses	—	10,756	—	8,120

As will be seen from the Table above, the Health Visitor/School Nurses have almost ceased visiting tuberculosis cases. The most marked change in the figures for 1958–59 is a decrease of 2,000 visits by Home Nurses. Since 1957, when Home Nurses paid 12,894 visits to 490 cases, there has been a decline of approximately forty cases and 2,000 visits each year.

During the year two Tuberculosis Visitors attended residential post-qualification courses and one attended a one-day Conference in London.

HOLIDAY HOME SCHEME

This scheme accepts cases mainly from the general practitioners and hospitals but some are put forward by the County's Medical and Nursing staff or by the Social Workers. It is inevitable that with the increasing percentage of those over pensionable age, living either with their equally old marriage partners or other relatives, or by themselves, a goodly proportion of these persons requiring recuperative holidays will be found among those in the latter half of life. The general criterion has been followed of helping those who would materially benefit from a few weeks away or be prevented from markedly deteriorating and also by including a number of the more severely handicapped who were being looked after by relatives to enable these relatives to have a few weeks relief or a holiday themselves.

Those who go away under these arrangements are assessed for payment in accordance with the County Council's assessment scheme.

There was more demand for convalescence in 1959 than for a number of years; eighty-two cases more than in 1958 (413 to 331). Of the 413, 383 were accepted, but eighty-seven of them cancelled their requests for one reason or another, some going away privately or through their firms, some having relapsed and requiring further treatment, and others because they did not wish

to complete the official assessment form or, indeed, to go away at all. Four infants under three years went away with their mothers, and in fourteen cases husbands and wives were sent for convalescence together.

TABLE 39.

	1958.	1959.
Applications received	331	413
Accepted	243	296
Not accepted	21	30
Cancelled applications	67	87
Sent to Hertfordshire Home	163	235
Infants under three who went away with mother	2	4
Couples who went away together	4	14

AGES OF PATIENTS.

0-1		2-5		6-15		16-45		46-65		66 +	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
2	1	0	4	—	—	20	54	42	82	28	67

BY WHOM REFERRED.

Own Doctor	Hospitals	County Almoners	Others
216	74	—	6

MEDICAL EQUIPMENT LOAN SCHEME

Members of the St. John Ambulance Brigade and British Red Cross Society manned the thirty-seven Medical Loan Depots, and the County Council is indebted to these two organizations for their keen interest and hard work. One Depot closed and a new subsidiary Depot was opened at South Oxhey in November.

The County Health Department continues to provide, under Section 28 of the National Health Service Act, special items of equipment for issue to the disabled. During 1959 nine self-propelling wheel-chairs and five indoor push-chairs were bought for issue on long-term loan to paraplegics or patients crippled by arthritis. One of these self-propelling chairs, fitted with a tray, was issued to an eleven year-old poliomyelitis victim to enable him to resume attendance at an ordinary school. An electrically-propelled chair was supplied to one case of polio-paraplegia, a thirty-two year-old mother, with two small children.

Two cases of severe paraplegia—one the result of a road accident—have been supplied with a bedstead fitted with lifting pole, latex mattress, hydraulic lifting hoist, inflatable toilet seat, and miscellaneous items of equipment such as syringes and forceps.

The charge which may be made under our scheme for the loan of this equipment is 10s. a week, though it is permissible for the Officer in charge of the Loan Depot to waive or reduce the charge, after considering the financial circumstances of the patient. The charge is based on the cost and the expected life of the equipment. Generally the Depots are able to maintain their stock of ordinary nursing equipment from the small loan charges which were agreed upon at a meeting of representatives of the County Council, the Order of St. John, and the British Red Cross Society in 1949.

There can be little doubt of the very considerable help these different pieces of equipment afford to the many disabled who have during the past years been assisted through the Medical Equipment Loan Scheme.

SECTION 29.—HOME HELP SERVICE.

1959 has been remarkable in so far as there is very little to report about the Home Help Service.

The number of households served continues to increase, a total of 5,263 households were given help, and of this number 433 re-applied for help during the year. The weekly case load rose from 2,236 at the beginning, to 2,431 at the end of the year (see Table 41).

It is pleasing to remark that tuberculosis patients requiring Home Helps were again fewer in number than during the previous year—187 during 1957, 150 during 1958, and 134 during 1959. Less easy to explain is the drop in the number of blind persons receiving help, only 141 during 1959, as against 174 during 1958. The reduction is apparent only in the old age pension group, however, so that it can probably be accounted for by deaths or by admission to hospitals or homes. The large reduction in the "Miscellaneous" group has been brought about mainly by a reclassification of some cases.

The trend in other figures is as expected.

TABLE 40.
HOUSEHOLDS ATTENDED DURING 1959.

	Tuberculosis	Chronic Sick	Blind	Acute Illness	Accident	Miscellaneous	Maternity and Nursing Mothers	Total
Cases other than O.A.P.s	107	466	37	629	22	72	1,228	2,561
Old Age Pensioners .	27	2,474	104	75	18	4	—	2,702
Total . . .	134	2,940	141	704	40	76	1,228	5,263

TABLE 41.

Cases Helped during year	Cases current at :		Weekly hours at 1.1.59	Equiva- lent No. of full-time Home Helps	Weekly hours at 31.12.59	Equiva- lent No. of full-time Home Helps	No. of Organizers and Clerks					
							1.1.59			31.12.59		
	1.1.59	31.12.59					Full-time	Part-time	Equiva- lent full-time	Full-time	Part-time	Equiva- lent full-time
5,263	2,236	2,431	15,345	348.7	15,902	361.4	15	12	21.7	16	12	22.2

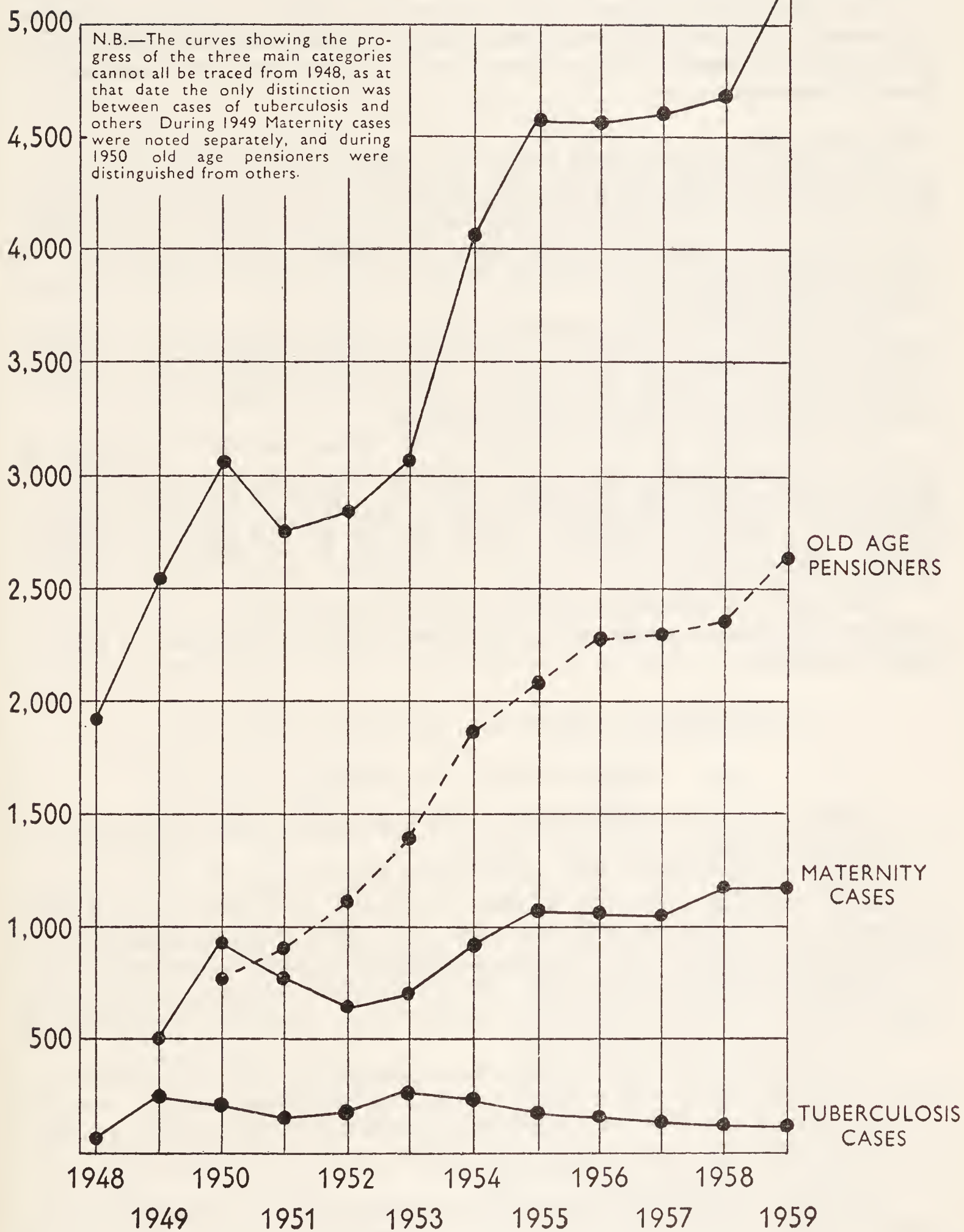
Recruitment of Home Helps.

At the end of the year there were 678 Home Helps employed, of whom nineteen were guaranteed full-time workers. Most organizers would welcome more workers of the right quality as they find that many householders are receiving less help than they really need. The shortage of workers, however, has not yet reached the stage where applicants for help are told that no help at all is available. The shortage makes the work of both the organizer and the Home Help more difficult, but we feel that it is preferable to employing women who might have lower standards than our present Home Helps. Periodically extra staff would be welcomed for a few weeks at a time in most areas, mainly because of the fluctuating demand caused by home confinements. It has been impossible to recruit "occasional" workers in this County, and without a number of these, crises are always likely to occur. Owing to the continuous rearranging of Home Helps' working programmes these crises are usually short-lived, but they give rise to considerable anxiety whilst they last.

Long Service Badges.

During 1959 ten Home Helps received badges for ten years' continuous service, and thirty-eight received badges for five years' continuous service. Most of these Home Helps attended the presentation at County Hall, where they received the badges from the Chairman of the Health Committee. Several members of the Health Committee also attended the presentation, and the ceremony was undoubtedly a memorable one for those concerned.

CASES HELPED SINCE 1948



Overalls.

Approximately half the Home Helps in the County have now been offered nylon overalls, and the majority prefer these to the cotton ones previously used. They are smarter in appearance and less trouble to wash. They dry quickly and need very little ironing.

Mass Radiography.

The unit visited Watford, Wheathampstead, Barnet, Cheshunt, Hitchin, Stevenage, and Stansted (Essex) during 1959, and all Home Helps living within a reasonable distance of any of these places were encouraged to attend for X-ray examination.

Organizing Staff.

It is with great sorrow that I report the sudden death of Mrs. Grace Dellar in May, 1959. Mrs. Dellar had been the organizer for Royston since the inception of the Home Help Service in that area, and had been an officer of the County Council since 1947. She had, at the time of her death, the longest service of all our Home Help Organizers, and her death was a great loss to Royston and a shock to her colleagues.

It was decided, as a temporary measure in the first instance, to absorb Royston into the area covered by the organizer working from the Divisional Health Office at Hitchin, and this has worked so smoothly that, so far as can be seen, there is no need to alter the system.

There has been one more appointment of an assistant organizer—in Barnet and East Barnet—and two part-time clerks have been appointed—in Welwyn Garden City and in Barnet—where the previous full-time clerk was promoted to assistant organizer. At the end of the year there were sixteen full-time and twelve part-time officers working as organizers or clerks in the Home Help Service.

New office accommodation has been found and occupied in Hitchin and Hertford, the latter a temporary arrangement pending completion of work at Bull Plain Clinic.

SECTION 51.—MENTAL HEALTH SERVICES.

MENTAL HEALTH ACT, 1959.

During the year much thought has been devoted to the development of the Mental Health Service in the County.

The Mental Health Act, 1959, received the Royal assent in July, and prior to this, in Circular 9/59, the Minister of Health had asked Local Health Authorities “to make an immediate review of their existing Mental Health Services and to decide on the manner in which they could be developed”.

At their meeting in June, 1959, the Health Committee recommended the appointment of a Mental Health Sub-Committee to consider and report on all matters relating to Mental Health.

To meet the needs of this rapidly-developing service, the establishment of Mental Welfare Officers and Training Centre staffs has been reviewed, training schemes have been introduced, and priorities decided in the building programme.

Dr. Alfred Torrie was appointed as Adviser to the Local Health Authority in psychiatric matters in October, 1958.

The County Council has approved an establishment of two full-time Mental Welfare Officers per 100,000 population, of which at least seven shall be Psychiatric Social Workers and one a senior Psychiatric Social Worker. In addition the staff of seventeen Welfare Officers will continue to devote 25 per cent of their time to duly authorized officers' duties.

Training Centre staffs are approved in the ratio of one teaching member to every twelve persons, plus one General Duties Assistant-Trainee at each Centre.

There is at present an acute shortage of qualified persons for employment as Mental Welfare Officers and teachers in Training Centres. In-service training schemes in Mental Health have been conducted since July, 1958, for Health Visitors, and since April, 1959, for Mental Welfare Officers. At Napsbury Hospital groups of twenty Health Visitors have been attending a course of weekly seminars by Dr. Torrie since July, 1958, and the Mental Welfare Officers have had a weekly study group with Dr. Torrie since April, 1959. Each session is combined with a study of some aspect of the work of the Hospital.

From September, 1958, to June, 1959, a weekly seminar organized in co-operation with Dr. Sutherland of the Tavistock Clinic, was held at the Principal Health Centre, Boreham Wood, and attended by four Assistant County Medical Officers and four Health Visitors.

At Welwyn Garden City psychiatric out-patient sessions are held in rooms made available to the Hospital Management Committee in our Gooseacre Clinic. In addition the Psychiatrist holds fortnightly case conferences attended by the Mental Welfare Officers and Health Visitors for the area.

One Mental Welfare Officer has been seconded to take the Mental Health Certificate course. The Council has agreed to second suitable Training Centre staff on full pay, with payment of course fees, to take the diploma course for teachers of the mentally handicapped, and it is intended to send the trainees from the Centres to this course after a period of practical work in the Centres.

The first priority in the building programme will be the replacement of adapted buildings in Hertford and Hitchin by purpose-built Junior Training Centres.

The following sections of the report deal with the Mental Health Service during 1959 under the two main headings, Mental Deficiency—which includes reports submitted by the Mental Welfare Officers—and under Lunacy and Mental Treatment Acts, the report of the Senior Authorized Officer.

MENTAL DEFICIENCY ACTS, 1913–38.

At the end of 1959 there were 1,947 mental defectives on the Authority's register, compared with 1,864 at the end of the previous year. These numbers were made up as follows :—

<i>Form of Care.</i>	<i>Numbers at :</i>		
	<i>31.12.59.</i>	<i>31.12.58.</i>	<i>Increase.</i>
Community Care :—			
(1) Statutory supervision	542	518	24
(2) Guardianship	25	25	—
(3) Voluntary supervision	364	326	38
In hospitals	1,016	995	21
Totals	1,947	1,864	83

There were 204 new cases brought to the Authority's notice during the year. By the end of the year forty-one had been admitted to hospital and 163 were continuing in community care. These new cases were referred from the following sources :—

Local Education Authority :—

As incapable of receiving education at school, on account of mental defect	43	
As requiring supervision after leaving Special Schools	22	65
On discharge from Mental Deficiency Hospitals or Guardianship		31
Moved into the County		19
Reported by : Assistant County Medical Officers and Health Visitors		28
Hospitals		21
Family doctors		10
Relatives		11
The police or the courts		5
Ministry of Labour and National Assistance Board		5
Other Departments of the County Council		9
		204

In thirty-four cases supervision was discontinued during the year. Twenty-seven were adults who were in regular employment and managing satisfactorily, six were children who had been previously excluded from the educational system, and were subsequently recommended for admission to special schools. The remaining case was a child who had been placed under voluntary supervision but at the age of five years was found suitable to attend school.

There were a number of changes in the areas of the Mental Welfare Officers during 1959 as new members of staff were appointed. Five new persons were appointed, but only three had taken up their duties by the end of the year. The other two could not have their appointments confirmed until they had passed their driving tests. Miss Rendle was seconded in October to the Mental Health Certificate course and will be away until October, 1960. Mrs. Rock resigned at the end of the year. These staff changes have led to the case-loads of the respective Officers being very dissimilar in number, and at the end of the year they varied from sixty-nine to 219. It is hoped that the two persons already appointed will pass their driving tests early in 1960, and efforts will be continued to recruit additional staff which will make it possible to reduce the larger case-loads still being carried by some of the officers.

There were 961 cases being regularly visited by the Mental Welfare Officers at the end of the year. This number was made up as follows :—

Statutory Supervision	542
Voluntary Supervision	364
Guardianship cases living in the County .	17
On licence from Mental Deficiency Hospitals	32
Mental After Care cases	6
	<u>961</u>

As reported in last year's report, the need for statutory action under the Mental Deficiency Acts has been very greatly reduced by the continued use of informal admission procedures to Mental Deficiency Hospitals. During 1959 it was necessary to obtain Orders on petition to Judicial Authorities in only ten cases in respect of Hertfordshire patients. A further six Orders were obtained on behalf of other Authorities for patients admitted to hospitals within the County. There were five instances where patients were ordered by the courts to be detained in institutions.

Unfortunately the reduction of the waiting list for patients requiring institutional care, reported in the 1957 and 1958 Reports, has not been maintained. The waiting list had risen from fourteen patients at the end of 1958 to fifty by the end of 1959, though arrangements had been made to admit four of these patients in early 1960.

The following table shows the age-range of patients on the waiting list at the end of the year, and it will be noted that forty out of the total of fifty were children under sixteen years :—

WAITING LIST OF CASES FOR ADMISSION TO INSTITUTIONS ON
31ST DECEMBER, 1959.

N.W. Met. Reg. Hospital Board						N.E. Met. Reg. Hospital Board				
	Aged 0-5	Aged 6-10	Aged 11-15	Aged 16 and over	Total	Aged 0-5	Aged 6-10	Aged 11-15	Aged 16 and over	Total
Males .	9	3	5	3	20	1	1	3	2	7
Females .	7	1	4	4	16	2	2	2	1	7
Totals .	16	4	9	7	36	3	3	5	3	14

There were seventy-three patients admitted to mental deficiency hospitals during 1959, compared with seventy-four in the previous year. As will be seen from the following table, fifty-three of these were patients over sixteen years of age, and only twenty places were found for children. The hold-up in admission of children was mainly due to virtual shut-down for the admission of children to Cell Barnes Hospital during the year, where extensive building works were carried out affecting the children's wards. These works were completed just prior to the end of the year, when an outbreak of infective jaundice occurred in the hospital, and this has led to a further suspension of admissions.

AGE RANGE OF CASES ADMITTED TO INSTITUTIONS DURING 1959.

N.W. Met. Reg. Hospital Board						N.E. Met. Reg. Hospital Board				
	Aged 0-5	Aged 6-10	Aged 11-15	Aged 16 and over	Total	Aged 0-5	Aged 6-10	Aged 11-15	Aged 16 and over	Total
Males .	5	2	2	30	39	1	1	—	1	3
Females .	7	2	—	22	31	—	—	—	—	—
Totals .	12	4	2	52	70	1	1	—	1	3

It was possible to help a number of families during the year by arranging for fifty-one mental defectives to have accommodation for short-term care, where either permanent vacancies were not available or not desired. In fifty cases the defectives were found accommodation in mental deficiency hospitals, and in one case a mentally defective child was placed by the Local Health Authority in a private residential nursery.

The following table shows the age range of cases dealt with in this way :—

CASES ADMITTED FOR SHORT STAY TO INSTITUTIONS AND
PRIVATE HOMES DURING 1959.

	Aged 0-5	Aged 6-10	Aged 11-15	Aged 16 and over	Total
Institutions .	14	10	8	18	50
Private Homes .	1	—	—	—	1
	15	10	8	18	51

Training Centres.

The Training Centres continued to provide a service very much appreciated by parents and relatives of mentally defective children and young adults. Five Centres are directly provided by the Authority, whilst at Cell Barnes Hospital, twenty-one places in the Hospital Centre are reserved for Hertfordshire children who attend daily.

At the end of the year 197 patients were on the Centres' rolls, compared with 173 at the end of the previous year. The following table shows the number on roll at the six Centres on the last day of the autumn term, and also those admitted and discharged during the year :—

Centre	Admitted during 1959	Discharged in 1959	On roll, last day of term, 1959
Barnet	11	8	32
Hemel Hempstead	9	1	29
Hertford	6	3	40
St. Albans	3	2	19
Hitchin	6	—	31
Watford	7	4	46
	42	18	197

Waiting List and Discharged Cases.

There were ten children and one young adult awaiting places at the end of the year. At Hemel Hempstead a vacancy was available for the adult, at Hitchin the two children on the waiting list there will commence attendance at the beginning of the spring term, when special transport covering Royston will be started. When the adult female Training Centre in Hertford is opened in February, nine of the senior girls, at present attending the Junior Centre, will transfer there, and this will enable the six children on the waiting list for this Centre to be admitted. There are two children awaiting admission at the Watford Centre, and they will be admitted as soon as a General Duties Assistant is appointed at this Centre, as there is already a preponderance of young children there, and the present staff cannot manage any more in the infant group without this additional help.

As will be seen from the following table, eighteen children were discharged from the Centres during the year. Two were readmitted to the educational system and six were admitted to institutions. Of the remainder, two were accepted for daily attendance at workshops in institutions in the County, five were either withdrawn by their parents or excluded as unsuitable, and three left the County.

DISCHARGES FROM TRAINING CENTRES.

Reason for Discharge	Barnet	Hemel Hempstead	Hertford	Hitchin	St. Albans	Watford	Total
Readmitted to educational system . . .	1	—	—	—	—	1	2
Admitted to certified institutions . . .	3	1	1	—	1	—	6
Advanced Training Class	1	—	—	—	—	1	2
Left County . . .	—	—	2	—	—	1	3
Withdrawn by parents	2	—	—	—	—	—	2
Excluded as unsuitable	1	—	—	—	1	1	3
	8	1	3	—	2	4	18

Premises.

At the Hitchin Centre a third room became available for use by the Training Centre during 1959, and the accommodation there now will cater for up to thirty-six persons.

Adult Training.

The Medical Superintendents at Harperbury, Cell Barnes, and Leavesden Hospitals, and the Superintendent at St. Raphael's Colony very kindly continued to allow a number of Hertfordshire patients, aged over sixteen years, to attend the Training Department in their hospitals.

During the year twenty persons were in attendance, of whom at the end of the year sixteen were still attending. Of the four cases discharged, one had found employment, one had been admitted residentially, one was withdrawn by the parents, and in one case the family moved to another part of the County, and a vacancy had been offered at the end of the year for the young man at the adult class in Hemel Hempstead Centre.

Transport.

The Centres have a wide catchment area, and transport does present difficulties. With the use of the Ambulance Service and the Health Department bus, and of hired vehicles, it is found possible to cover all parts of the County. One hundred and forty-four persons are conveyed in hired vehicles, fifty-seven travel by ambulance or in the Health Department bus, eleven walk, and the one out-County child travels under arrangements made by the maintaining authority.

Meals.

These are obtained through the School Meals Service of the Local Education Authority. Children under sixteen are charged 1s. for the midday meal. Necessitous cases, however, are assessed on the Education Committee's scale, and where eligible, receive free meals. Those cases aged sixteen years and over who attend the Authority's Centres become eligible for a maintenance allowance from the National Assistance Board, and until March, 1959, were required to pay the full cost of the meal. The Health Committee then decided that in order to encourage the older persons to have a cooked meal at the Centres the charge should remain at 1s. 9d. per day and not be increased to 2s., to meet rising costs.

Adult Training.

The Social Workers have classified persons over sixteen years under their supervision as regards their suitability for training.

At the end of the year 153 (sixty-three male and ninety female) persons were deemed suitable for adult training. Of this number fifty-three (twenty-five male and twenty-eight female) were receiving daily training, sixteen (fourteen male and two female) in adult classes in institutions, and the remaining thirty-seven (eleven male and twenty-six female) had continued to attend the Junior Centres. The remaining one hundred patients deemed suitable are not receiving any form of training, but of this number the parents of forty-two (thirteen male and twenty-nine female) have stated that they would not accept the offer of daily training.

Admission arrangements have been made for two males to commence adult training early in 1960, and when the Hertford adult female Training Centre opens in February, places will be offered for thirteen persons, leaving a balance of forty-three (twenty-three male and twenty female) cases willing to attend, but for whom at present no provision is made.

The following tables show the distribution of these cases throughout the County :—

ADULT TRAINING.

Division	Cases Deemed Suitable			Cases Receiving Daily Training		
	Males	Females	Total	Males	Females	Total
East Herts . .	8	25	33	2	6	8
North Herts . .	6	16	22	1	5	6
Welwyn . . .	3	9	12	—	4	4
South Herts . .	6	6	12	1	3	4
South-West Herts .	17	19	36	11	5	16
Dacorum . . .	13	5	18	7	3	10
St. Albans . .	10	10	20	3	2	5
Totals . . .	63	90	153	25	28	53

Division	Cases Willing but not Receiving Training			Cases Unwilling for Training		
	Males	Females	Total	Males	Females	Total
East Herts . . .	3	12*	15	3	7	10
North Herts . .	3	5	8	2	6	8
Welwyn	3	1*	4	—	4	4
South Herts . .	4	1	5	1	2	3
South-West Herts .	6†	11	17	—	3	3
Dacorum . . .	1*	1	2	5	1	6
St. Albans . .	5	2	7	2	6	8
Totals . . .	25	33	58	13	29	42

* To commence training in early 1960.

† One of the above to commence training in early 1960.

The following reports have been submitted by the Mental Welfare Officers.

North Herts Division, Harpenden, Welwyn Garden City, and Welwyn.

During the year there were in these combined areas a total of 187 cases under supervision, although at the end of November forty of these patients from Welwyn and Welwyn Garden City came under the care of a newly appointed Mental Welfare Officer for Mid-Herts. Of the 187 patients, 113 were under statutory supervision, sixty-five under voluntary supervision, six under guardianship, and three on licence from institutions.

In the course of the year eleven patients were admitted to Mental Deficiency Hospitals, two young men being sent by the Courts, two middle-aged patients needing care following the death of aged parents, three adolescent boys unable to keep in employment and being beyond the management of their parents, and in need of training, three small children whose mothers could no longer cope with them and had to be given relief to avoid breakdown, and an emergency case of a man found wandering and picked up by the police. Thus, at the end of the year there were in the North Herts and Harpenden districts only five cases remaining on the waiting list for residential care and only one of these, a completely helpless boy of five, was in any way urgent and fortunately it was possible to place him early in the new year. This can be said to be reasonably satisfactory in view of the desperate need for beds generally.

It was also possible to arrange for temporary residential care to enable families to have holidays and especially to give mothers a break without the burden of the handicapped child, in most cases where this was requested. Unfortunately Cell Barnes Hospital was unable to give their usual amount of help in this respect owing to extensive building work being carried out there and an epidemic of jaundice.

The Training Centre at Hitchin has done excellent work during the year and the provision of an additional classroom and the appointment of an extra teacher enabled a number of new children to be admitted, leaving only two Royston children on the waiting list at the end of the year; these, however, were admitted early in the new year, special transport arrangements being made for them. The Centre now has places for thirty-six children and should be adequate for children under sixteen years for the next year or two but several children over sixteen years will have to be excluded and the problem of providing for them faced. Until adult Training Centres are available they must remain at home with little to occupy them or be admitted to Mental Deficiency Hospitals. North Herts is less fortunate than some of the other divisions as there are no hospitals to which they can go for daily training as quite a number do in other parts of the County. This will be offset to a considerable extent when the new junior Training Centre is provided since, as at Hemel Hempstead, it is being built to meet the ultimate demand of the area and for some years there will be room for an adult Training Class.

The employment problem continued to be a difficult one to solve; it applies largely to the Special School leavers who are referred under Section 57 (5) of the Education Act, 1944. At sixteen years of age they are for the most part so childish and immature that it is expecting rather a lot of them to settle in employment with boys and girls of normal mentality; frequently it has been found that after a further two years at home—especially where there is a good family background—the boy or girl has developed sufficiently to face employment and keep a simple job.

It has been increasingly obvious that the wide publicity now being given to Mental Health is making for easier relationship with parents, employers,

and the public, and perhaps more important, a readier acceptance by the parents of their own particular problem.

East Herts Division.

This area covered Hertford Borough and Rural Districts, Ware Urban and Rural Districts, Hoddesdon, Cheshunt, Bishop's Stortford, Sawbridge-worth, and Braughing Rural District, and at the end of 1959 there were 206 cases under supervision. Of these three were mental after-care cases, the remainder being all mental defectives.

Permanent residential care in Mental Deficiency Hospitals was arranged for eleven patients. Two of these vacancies were for children, and of the remaining nine adults, only two of these were admitted under Order. This left a waiting list at the end of the year of sixteen. Eleven of the latter were children under the age of sixteen, and the waiting list for this age group is now beginning to rise again. Several of these are completely helpless children needing constant nursing care, and thereby causing a great deal of strain and often unhappiness within the family whilst they remain at home. Unfortunately South Ockendon Hospital are able to offer only an occasional vacancy and the prospects of finding beds for the children on the waiting list are poor for the near future. Short-term care was arranged for a number of children so that their parents might have a holiday by themselves, and this service is always much appreciated. The Social Worker continues to admire those mothers who manage to care at home for helpless and difficult children for many years with uncomplaining devotion.

The Training Centre has been full during the whole year with forty children on the roll ranging from five years old to one or two girls over twenty. It has not yet been found necessary to exclude children on account of age, though it is hoped next year to accommodate the older girls separately with benefit to both the children and the staff. As yet there is little provision in this area for the adult male defective who is unemployed and still living at home, though three boys from the Cheshunt area have been attending St. Raphael's, Potters Bar, for occupational therapy daily. One of these was admitted there residentially during the year.

The employment situation is still not very easy for those school leavers referred, though there is perhaps less unemployment than in the previous year. The majority of school leavers referred are boys who are suitable for such work as simple labouring outside, or sweeping up and odd jobs in factories. Some sixteen-year-olds, however, are so very childish and immature that institutional training is sometimes necessary.

Only one case came before the Court last year—a married woman who had physically harmed her child, and who was sent for training to a mental deficiency hospital.

The general scope of the work is now broadening to include the mentally sick, and while only three such cases were visited during the year, it is anticipated that this service will increase gradually, as there must be a great need for it.

St. Albans and Dacorum Divisions.

At the end of 1959 there were 219 cases under supervision in these areas and they could be divided as follows: Under statutory supervision 102, under voluntary supervision 103, guardianship 1, and on licence from institutions 13.

A number of new cases have been referred during the year under Section 57/3 and Section 57/5 of the Education Act.

Some of the cases on licence have been discharged from Order and, with the help of a good landlady, are doing quite well, but of course they still need care and supervision, although they very often resent this, and in some cases

this has resulted in their leaving the district. One of the cases in St. Albans has been rather a sad one. After fourteen years' employment in the kitchen of a hospital, where she has done good work, this woman has had outbursts of obsessional mania which made it impossible for her to remain in her employment. In May she was admitted to Cell Barnes Hospital where she remained for three months, and as she seemed to be fit for her employment again she returned to the hospital. Unfortunately she again deteriorated and the outbursts became worse. Her own doctor had her admitted to Hill End Hospital where she remained for seven days and, as she gave no trouble, she was discharged and returned to her work, but almost at once the trouble started again and finally she was again admitted to Cell Barnes Hospital. It was a very sad case, since it was impossible to make her understand that this action was necessary for her own good and, knowing the Mental Welfare Officer as a friend she was pleading all the time not to be taken to hospital.

One of the main difficulties of the work during the year has been the inability to get urgent cases, especially children, admitted to a hospital. Cell Barnes Hospital is still unable to admit due to the structural alterations being incomplete and, in the latter part of the year, to an epidemic of jaundice which prevented any admissions. There are now a number of small children urgently awaiting admission and this is causing real distress in some cases.

The Training Centre at Cell Barnes has done good work with the day children during the year. Unfortunately it had to be closed down during the jaundice epidemic and some of the day children were affected, but fortunately not seriously.

The Training Centre at Hemel Hempstead was opened in March and both parents and staff are delighted with it. It is a really attractive and well equipped Centre and Miss Sparks and her staff do excellent work with the children. In March a male Instructor was appointed for the training of the older boys and this has been a great success. Mr. Hitchcock is excellent with the boys and their response to his handling of them is a very satisfactory thing to see. They are doing some very good carpentry which the boys enjoy, and have more orders in hand than they can get through. The older boys are also enjoying gardening and already have done quite a lot of it. Two of the senior boys are high grade, but still too immature to be placed in industry, but it is hoped that after a year in the senior unit they may then be ready for employment.

There have been four new admissions during the year and two other children whose parents would not allow them to attend at the old Centre are now coming daily.

I would like to mention Mr. Knight who does the transport for the children at Hemel Hempstead Centre. We are greatly indebted to him for his unfailing co-operation and for the great interest he takes in the children, and the kindness which is always shown to them by him and his drivers.

Local interest in the Centre has been shown by gifts for the provision of special equipment. Miss Sparks was able to purchase two tricycles and a swing from a gift of money from the "Round Tablers" and the Parents Association has also made gifts to the Centre.

South-West Herts Division.

I started my term of appointment with the County in mid-July as the Mental Health Social Worker for the Dacorum Division. Subsequently I was transferred to the South-West Herts Division in mid-September as the Social Worker for that area was seconded for a year to enable her to take the Mental Health course at the London School of Economics. Later in the year a male

Social Worker was appointed to take over the supervision of all the adult male cases in the area, and this is proving very successful. At the end of the year I had ninety-nine cases on statutory supervision, forty-nine on voluntary supervision, five on licence, with one mental after-care case, totalling 154 in all.

During the year it was evident that there is a great need for a General Duties Assistant at Watford Training Centre, especially as there are so many five- to seven-year-old children attending in comparison with children of other ages, and because there are several other young children in the area waiting to attend. The work of the staff of the Centre and the training the children receive is greatly appreciated by the parents and enjoyed by the children.

During the past year, due to modernization, decoration, and a jaundice epidemic, Cell Barnes Hospital has not admitted any children from this area, which has resulted in numerous inquiries for the social workers to deal with and great hardship for the families concerned.

Co-ordination and co-operation between the Social Services and Government Departments in this area are excellent and well-established. There is fortunately no shortage of simple repetitive jobs in this area for girls that are capable of doing them. However, there are many emotional problems connected with the feeble-minded girls, especially the E.S.N. school-leavers, resulting in much work for the Social Worker. On the other hand, in the Dacorum area, which is relatively new, the services are not developed, although working in a new town was accepted as a challenge.

The social worker feels that it is essential to have a well-equipped and manned central office to run a successful mental health service in this area ; at which local medical, social, and industrial services, together with the families concerned can obtain immediate attention.

LUNACY AND MENTAL TREATMENT ACTS.

YEAR TO 31ST DECEMBER, 1959.

Report of Senior Authorized Officer.

The new Mental Health Act, 1959, received Royal assent on 29th July, 1959. The various provisions thereof will come into operation on such dates as the Minister may by order appoint.

The only Order made by the Minister during the year was one whereby, with effect from 6th October, 1959, designated Mental Hospitals, etc., may admit patients without using the procedure laid down by the Lunacy and Mental Treatment Acts. Any patient who is not unwilling to be admitted and can suitably be treated without powers of detention may now be admitted informally in the same way as patients are admitted to general hospitals. These informal admissions will, as in the case of general hospitals, usually be arranged by the patient's own doctor or by the hospital itself when the patient may be attending the out-patient department.

There were no changes during the year in the catchment areas of the four Mental Hospitals receiving patients from various areas in the County, but the Claybury Hospital was designated for the purpose of Section 20 of the Lunacy Act, 1890 (i.e. for the reception of cases for "observation").

A proposal by the North-East Metropolitan Regional Hospital Board to transfer the nine County Districts in East Hertfordshire from the catchment area for Claybury Hospital, near Woodford, to that of Severalls Hospital, near Colchester, was objected to by the County Council, and at the close of the year the matter was still under consideration.

Cases were dealt with by the Duly Authorized Officers as follows :—

	Men.	Women.	Child.	Total.
(1) <i>Reception Orders (Certified Patients).</i>				
Admitted direct to Hospital	18	26	—	44
Admitted to Hospital after “ observation ” under Sections 20/21	1	1	—	2
By action subsequent to making of Urgency Order	17	40	—	57
By action subsequent to admission as Voluntary patient	6	9	—	15
By action subsequent to admission as Temporary patient	—	—	—	—
By action subsequent to admission as “ Informal ” patient	2	2	—	4
(2) <i>Voluntary Patients.</i>				
Admitted direct to hospital through the Authorized Officers	31	41	—	72
Admitted to Hospital after “ observation ” under Sections 20/21	8	8	—	16
By action subsequent to admission to Hospital under Urgency Order	77	173	—	250
(3) <i>Temporary Patients.</i>				
Admitted direct to Hospital	4	—	—	4
Admitted to Hospital after “ Observation ” under Sections 20/21	—	—	—	—
By action subsequent to making of Urgency Order	1	5	—	6
(4) <i>Urgency Orders.</i>	110	238	1	349
(5) “ Observation ” Cases	21	29	—	50
(i.e. patients admitted to “ Observation ” Wards under Sections 20/21 (including those above who were subsequently admitted to Mental Hospitals.)				
(6) <i>Informal Patients (from 6.10.59).</i>				
Admitted direct to Hospital after consultation with Authorized Officers	1	8	—	9
By action subsequent to admission to Hospital under Sections 20/21 (Observation)	3	8	—	11
By action subsequent to making of Urgency Order	6	3	—	9
(7) <i>Cases advised by the Authorized Officers without specific action</i>	31	54	—	85
Total “ actions ” taken	337	645	1	983

(These figures exclude “ out-county ” cases to which reference is made below.)

Many patients are the subject of more than one “ action ”, e.g. first admitted under an Urgency Order and subsequently certified or transferred to the Voluntary Class, etc.

The total number of individuals included in the above statistics is 625 (222 men, 402 women, and one child), as compared with 623 in 1958. These figures do not include persons admitted direct as voluntary patients through their own doctors, psychiatric out-patients’ department, and the new class of “ informal ” patient, or otherwise than by reference to the “ Duly Authorized Officers ”.

The total number of persons admitted direct to hospital under Reception Orders (Certification) during 1959 was forty-four, as compared with an average of ninety-five over the previous ten years, and the number subsequently certified after initial action under other provisions was seventy-eight, as compared with an average of 114 over the previous ten years.

The number of cases admitted to hospital under Urgency Orders fell slightly from 374 in 1958 to 349 in 1959 (representing 56 per cent of the total number of individuals dealt with), and the number of cases admitted to observation wards was fifty (thirty-one in 1958). Of these 399 patients only 15 per cent were subsequently “ certified ”, 66 per cent became voluntary patients, and 1·5 per cent temporary patients.

Of the Urgency Order cases four died before subsequent action became necessary, and twenty-three were discharged, or otherwise dealt with without further action under the Acts.

Of the fifty cases dealt with under Section 20/21, thirty-nine came from East Herts area and were admitted to the "observation" wards at the North Middlesex and Claybury Hospitals, and two were admitted to Fulbourn Hospital from North Herts area. The remaining cases came from the South-West Herts area and were admitted to several hospitals in the London area.

Under Statutory provisions, where cases are admitted to the Napsbury and Shenley Hospitals in this County from their wide catchment areas outside Hertfordshire, other than under Summary Reception Orders, and further action is subsequently required, it is necessary for Hertfordshire Duly Authorized Officers to be called in to take such action. During the year thirty-nine of these cases (nine men and thirty women) as against a total of forty-nine during the previous year were dealt with by the Officers for the St. Albans, South Herts, and South-West Herts areas. These cases are in addition to those shown in the above table and added to the work of the Officers in the areas concerned.

During the year under review the following persons of pensionable age were certified :—

60-64.		65-69.		70-74.		75-79.		80 and over.		Total.		
M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.	T.
—	2	—	1	1	2	3	7	4	9	8	21	29
Previous year										4	26	30

NURSING HOMES.

At 31st December the number of Nursing Homes registered under the Public Health Act, 1936, was twenty-one. These Homes in total are registered for forty-nine maternity cases and 340 medical, surgical, or chronic sick patients. The Homes are inspected regularly by Nursing Officers and, where necessary, by Medical Officers. Three Homes closed during the year and one re-registered as an Old Persons Home under the National Assistance Act. One new Home, providing sixteen beds for cases other than maternity, was registered and another re-registered for an increased number of beds.

One Mother and Baby Home is granted exemption from the provisions of the Public Health Act.

PRIVATE OLD PERSONS HOMES.

These Homes, registered by the Welfare Committee under the National Assistance Act, 1948, are inspected regularly by the Nursing Officers on behalf of the Welfare Department. At the end of the year thirty-eight Old Persons Homes were registered and under supervision, four more than at the end of 1958.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948.

TABLE 42.

	Nurseries	Daily Minders	Places Provided
1955	9	32	142 } 460 318 }
1956	14	49	316 } 765 449 }
1957	17	59	391 } 830 439 }
1958	25	113	635 } 1,347 712 }
1959	27	125	688 } 1,518 830 }

At 31st December, 1959, seven of the Daily Minders were caring for ten children placed by the Health Department. Payment at the rate of 35s. per week for these children is made by the Authority under Section 22 of the National Health Service Act, 1948, and a charge is made to the parents in accordance with the County Council's scheme.

The work in connection with the registration and inspection of these Nurseries and Homes of Daily Minders is largely undertaken by the Divisional Nursing Officers and Health Visitors.

ENVIRONMENTAL HYGIENE AND SANITARY ADMINISTRATION.

This report deals with the work of the County Health Inspector.

MILK AND DAIRIES.

(a) *Sampling of Milk for the Detection of Tubercle Bacilli.*

Our policy for the last few years has been to sample each tuberculin tested herd once a year and each non-designated herd every six months. The view has been expressed, however, at a Health Committee meeting that owing to the possibility of tubercle infection being introduced into tuberculin tested herds during the period between the Ministry of Agriculture and Fisheries tuberculin tests, it would be advisable to increase the frequency of biological sampling to once every six months. Towards the latter end of the year this was in fact being carried out.

The Ministry of Agriculture, Fisheries and Food's T.B. eradication scheme means that while there are still non-designated milk herds in the County, i.e. those not producing milk from tuberculin tested cows, these non-designated herds are now being subjected to compulsory tuberculin testing and reactors are being removed for slaughter. By the end of the year practically the whole County had reached "Attested" standards of herd health but there were still a few outstanding farms where there was a continuous record of reactors. These farms are subjected to retesting at frequent intervals and it is hoped that by early 1960 all reactors will have been slaughtered.

The T.B. eradication scheme, the popularity of attestation, and the production of tuberculin tested milk has had a tremendous impact on the percentage of T.B. positives from herds in the County. The following Table shows the biological sampling results over the last four years.

TUBERCLE SAMPLES.

TABLE 43.

Year	Total No. of Completed Tests	Non-Designated			Tuberculin Tested		
		Neg.	Pos.	%	Neg.	Pos.	%
1956	1,016	329	9	2.66	677	1	0.15
1957	949	236	10	4.07	700	3	0.43
1958	1,065	222	2	0.90	841	—	—
1959	953	120	—	—	831	2	0.24

It is interesting to think that at the beginning of this decade the percentage of T.B. positive samples from all herds was approximately 4 per cent.

During the year there were no T.B. positive samples from non-designated herds and two positives from tuberculin tested herds. As a result of these latter samples one cow was slaughtered from one herd and found to be affected with T.B. and the veterinary investigation at the other herd failed to reveal a T.B. excreting animal.

During 1960 it is proposed to sample all herds in the County at six-monthly intervals as instructed by the Committee and if the number of T.B. positive justifies this extra work, then there may be good reasons for continuing the scheme. If the impact of the T.B. eradication programme is such that we no longer get "positives" then there must be a reconsideration of the frequency of sampling.

We have a three-cornered liaison scheme between the Divisional Veterinary Officer, the District Medical Officer of Health, and the County Medical Officer. Positive sample results are immediately reported to both the District Medical Officer and the Divisional Veterinary Officer; the former because he has powers for stopping or diverting the milk for pasteurization, and the latter for the subsequent herd investigation and removal of infected animals under the Tuberculosis Order of 1938.

(b) *Brucella Infection in Milk.*

Our biological samples are tested for the presence of *Brucella* organisms in addition to those of tuberculosis. *Brucella abortus* causes contagious abortion among cattle and is responsible for undulant fever in man. Undulant fever is not a notifiable disease and no cases came to light during the year.

Out of the 831 tuberculin tested milk samples examined for *Brucella* six were positive, giving a percentage of 0.72. Of 119 non-designated samples there was one positive—a percentage of 0.84.

If the fall in T.B. positives has been satisfying, then that for *Brucella* has been little less than spectacular when it is considered that sampling results from all herds at the beginning of the decade gave something like 10 per cent positives. Much of the credit for the decrease in this disease is due to the calf vaccination scheme of the Ministry of Agriculture, Fisheries and Food. Under this official scheme any owner of cattle may have his calves and unserved heifers vaccinated with "Strain 19" for a very small charge. The vaccination of cows must still be carried out privately by the farmer through his Veterinary Surgeon.

(c) *Methylene Blue/Biological Samples.*

We have continued our scheme whereby occasional samples of non-designated milk are taken from selected farms for methylene blue testing at the same time as biological samples are taken. This scheme was originally introduced in order to assist the Agricultural Executive Committee in their control of milk production methods on non-designated farms. Owing to the rapid disappearance of non-designated farms, however, the scheme is of much less practical importance than it was and only twenty-three samples were taken during the year. Seventeen of these passed which gives a percentage of failures of 26.1. Some of the failing samples were obtained from farms which are now in the process of becoming tuberculin tested and these will, therefore, be included in the official Ministry sampling scheme.

(d) *Supervision of Pasteurizing Plants.*

The County Council, in so far as it is the Food and Drugs Authority, licenses and supervises pasteurizing plants throughout the County. We control thirteen pasteurizing plants of which seven are holder plants and six high temperature short time plants.

The high temperature short time plant subjects milk to a pasteurizing temperature of not less than 161° F. for a period of not less than fifteen seconds while the batch holder heats and retains the milk at a temperature between 145° F. and 150° F. for not less than thirty minutes. The following Table shows the result of pasteurized milk samples taken during the year.

TABLE 44.

PASTEURIZED MILK SAMPLES.

	Phosphatase Test			Methylene Blue Test		
	Pass	Fail	%	Pass	Fail	%
Holder . .	323	9	2·71	320	1	0·31
H.T.S.T. . .	313	1	0·32	307	—	—
Totals . .	636	10	1·55	627	1	0·16

Pasteurized milk has to comply with both the phosphatase test which is indicative of the amount of heat to which the milk has been subjected and also the methylene blue test which is a keeping quality test. In the case of the high temperature short time plants the results of the phosphatase tests were very satisfactory and the one failure which did occur could not be attributed to any particular cause. In the case of the holder plants nine failures out of a total of 323 samples cannot be considered as being too satisfactory. It must be remembered, however, that every effort is made to take samples in such a manner as to show up any weaknesses which may be inherent in either plant or dairy technique. First flow samples are often taken following the holding period and, unless precautions are taken to prevent milk seeping past the outlet valve and, therefore, being insufficiently heat-treated, there is more chance of phosphatase failures than would be the case with normal samples. In fact most of the failures which did occur were due to leaking outlet valves. The methylene blue test results for both holder and H.T.S.T. plants can be considered as satisfactory.

SWIMMING BATHS.

Forty-two swimming baths are approved for use by Hertfordshire County schoolchildren. Of these twenty are public pools, two are privately-owned and twenty are actually at schools. The water in these pools is kept bacteriologically pure either by continuous circulation with filtration and chlorination or by using the "fill and empty" method. In the latter case chlorine in the form of hypochlorite is added in order to maintain not less than 0·5 parts per million of free chlorine and the bath is emptied at frequent intervals and refilled with clean water.

The Table below shows the results of sampling during the year.

TABLE 45.

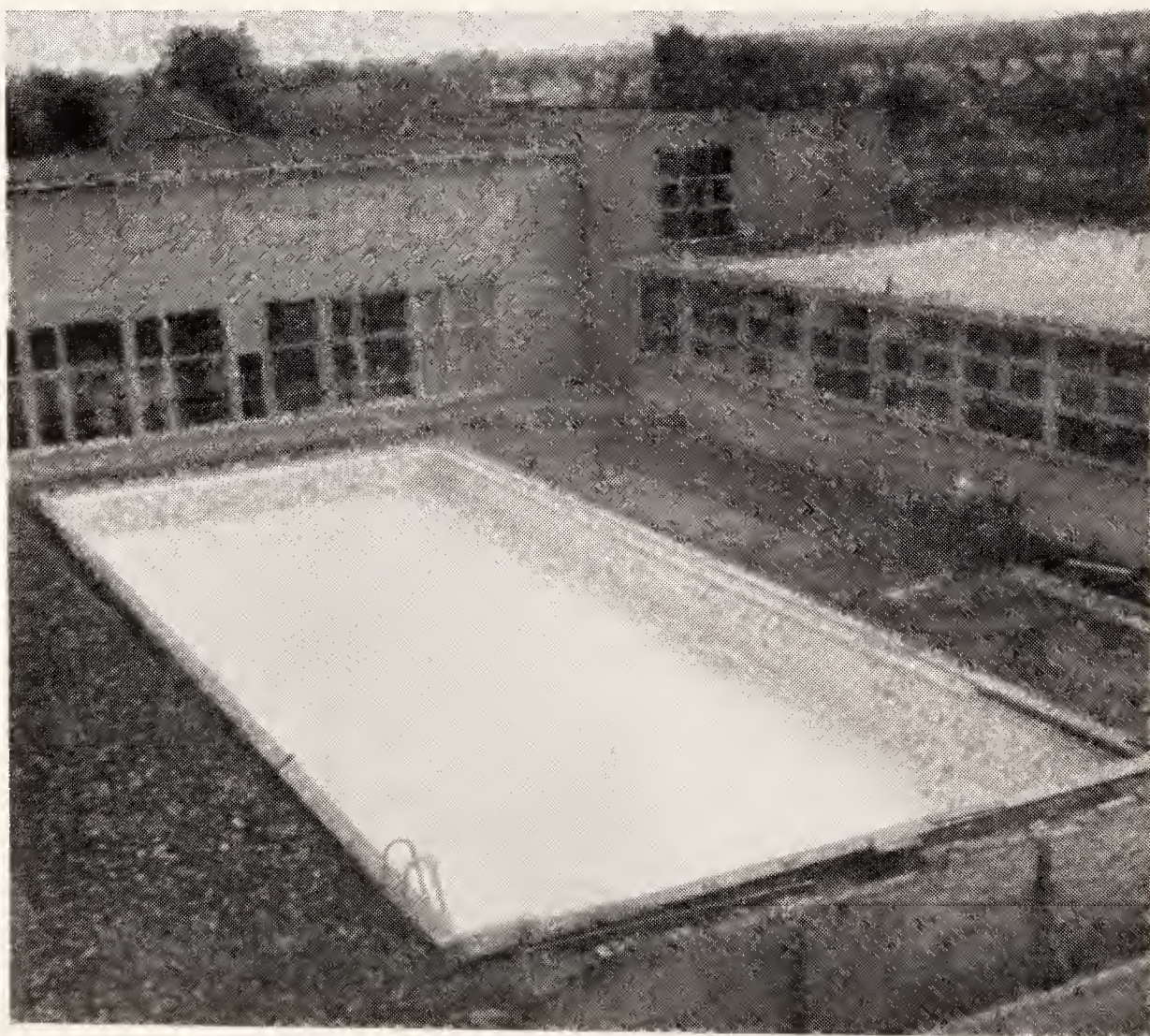
SAMPLING RESULTS—SWIMMING BATHS.

	Satisfactory	Not Satisfactory	Percentage not Satisfactory
Continuous flow (28 pools) .	664	27	3·9
" Fill and empty " (14 pools)	125	10	7·4

Fifteen of the failures which occurred in samples from baths using the continuous flow method of purification were shared between two baths, both of which are used by the general public. In both cases visits were made and advice given. A close watch will be kept on these two pools during the next swimming season.



A COUNTY PRIMARY "TEACHING" POOL



SECONDARY SCHOOL SWIMMING POOL NEARING COMPLETION

The ten failures from "fill and empty" pools included three from a small pool built by voluntary effort and completed during the summer. The trouble was due to lack of chlorine in the water but as soon as the "chlorination drill" was perfected, the sampling results were satisfactory. In spite of this it was decided that a circulation system with sand filter and chlorination plant would be installed and this will be ready for the 1960 season. Our policy of insisting that those school swimming baths which are built by voluntary effort be fitted with blanked-off inlets and conventional outlets pays good dividends when modern treatment plants are installed at a later date. The installation can be carried out with a minimum of trouble as the circulation pipes are already in place and simple connections only have to be made.

Of the pools now in use twenty which are open to the general public use the continuous flow purification system. One privately-owned pool, in the north of the County which is available for use by schoolchildren has a modern circulation and purification plant. The school swimming baths include seven which are provided with continuous flow purification systems.

During the year four new pools were completed by Parent Teacher Association effort. Two of these are of the "teaching" type while the other two are suitable for more serious swimming and are equipped with continuous circulation systems with automatic filtration and chlorine dosing. This makes a total of eight swimming pools which have now been completed by voluntary effort at the schools and these are all of an excellent standard of workmanship. Photographs of a "teaching" pool and a more advanced pool, both built by voluntary labour, are shown in the body of this report.

In the last ten years the number of swimming pools available to County schoolchildren has increased from twenty-two to forty-two, and control is becoming quite an item in the public health work in the County. The County Health Inspector was recently asked to give an address on the subject to his Association. The address was later published in the *Medical Officer* on 17th April, 1959, and the demand for copies was such that reprints had to be obtained.

REFUSE DISPOSAL.

The deposit of refuse imported from one district to another is prohibited under Section 26 of the Hertfordshire County Council Act, 1935, unless consent is issued by the County Council. These consents can stipulate certain conditions which must be observed when the refuse is tipped and enable operations to be controlled in such a way so as to prevent nuisances arising. During the year three new consents were issued for the disposal of putrescible material and two new consents for the disposal of non-putrescible material. One of these latter consents was for the tipping of power station ash which is removed in the form of a slurry and pumped into a wet gravel pit. The slurry gradually settles and lifts the floor of the site and, in fact, there is now a small area of "reclaimed" land which can later be covered with top soil and restored for agricultural use. The process will be a very slow one.

During the year 410 visits were made to refuse tips by Officers of the Department.

One of the problems which we meet occasionally is the difficulty which District Councils have in finding employees to carry out the manual work of refuse collection and disposal. In these days of full employment a dustman's job is rather looked down on and manual workers can usually find something more pleasant and better paid. The shortage of labour has a direct effect on the refuse collection services and while most District Councils try to maintain a weekly collection of household and trade refuse, this falls down from time to time through workers leaving for other employment. Now that much of the refuse from the District Councils is handled by private firms at large central

tips, the labour problems associated with disposal no longer worry them. It is difficult to see, however, how one can overcome the shortage of collectors and drivers unless high bonus rates or incentives are given.

TABLE 46.

NEW HOUSING.

	Local Authorities and Housing Associations		Private Builders	
	Under construction	Completed since 1st April, 1945	Under construction	Completed since 1st April, 1945
BOROUGHES.				
Hemel Hempstead . . .	76	1,168	158	712
Hertford	66	947	32	288
St. Albans	84	2,996	56	1,226
Watford	190	3,550	118	1,478
Totals—Boroughs . . .	416	8,661	364	3,704
URBANS.				
Baldock	—	522	4	102
Barnet	—	842	40	882
Berkhamsted	39	519	65	554
Bishop's Stortford . . .	40	676	120	1,522
Bushey	32	598	162	1,143
Cheshunt	18	1,450	578	2,621
Chorleywood	—	198	45	613
East Barnet	74	821	19	1,194
Harpenden	10	661	66	1,215
Hitchin	69	974	136	1,127
Hoddesdon	26	814	115	980
Letchworth	286	1,724	113	593
Rickmansworth	68	1,065	100	1,107
Royston	18	498	96	177
Sawbridgeworth	22	212	21	271
Stevenage	64	555	83	208
Tring	—	150	20	204
Ware	95	626	32	319
Welwyn Garden City . .	5	1,297	4	208
Totals—Urbans	866	14,202	1,819	15,040
RURALS.				
Berkhamsted	6	168	23	325
Braughing	—	432	21	200
Elstree	35	1,527	36	839
Hatfield	59	1,407	216	1,321
Hemel Hempstead	20	753	54	534
Hertford	27	561	22	343
Hitchin	28	882	56	644
St. Albans	64	1,631	233	2,206
Ware	12	674	31	253
Watford	28	822	173	1,511
Welwyn	18	368	45	265
Totals—Rurals	297	9,225	910	8,439
TOTALS—COUNTY . . .	1,579	32,088	3,093	27,183

This Table does not show the housing development in the New Towns within the County boundary. The following Table shows the number of houses completed in the New Towns at the 31st December, 1959 :—

	Under construction	Completed
Hatfield	395	2,402
Hemel Hempstead . .	1,171	8,458
Stevenage	1,116	8,629
Welwyn Garden City . .	570	3,737
Totals	3,252	18,226

